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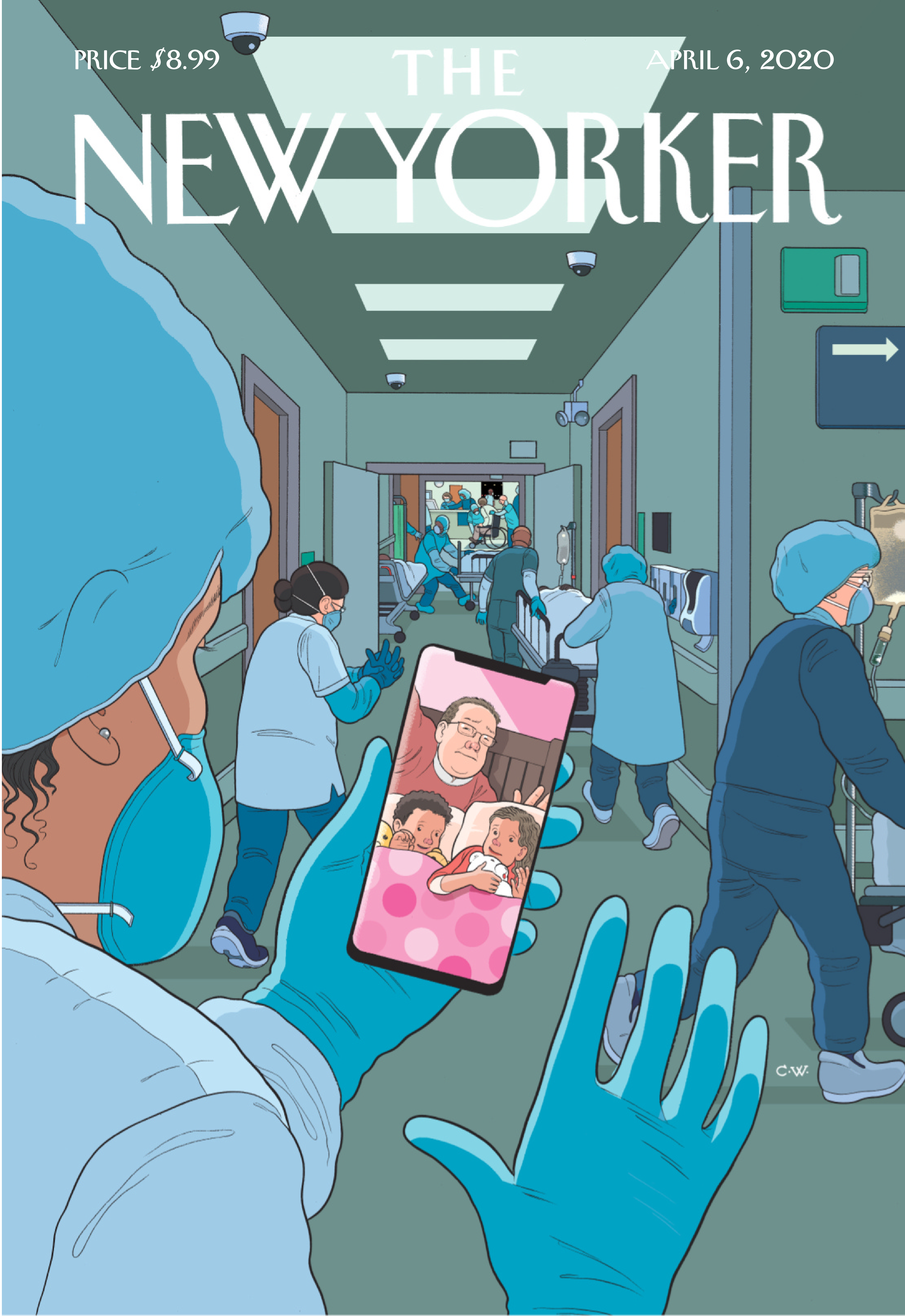

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THE HEALTH ISSUE

APRIL 6, 2020

4 GOINGS ON ABOUT TOWN

11 THE TALK OF THE TOWN
Trump vs. science, by Steve Coll; ventilator drive; soup kitchen; Alex Jones's bogus cures; home front; gun sales; streaming comedy.

CORONAVIRUS CHRONICLES

Siddhartha Mukherjee 18 The One and the Many
Why quantifying the process of infection is crucial.

COMIC STRIP

Emily Flake 21 "'Parent' as a Verb: Quarantine Edition"

SHOUTS & MURMURS

Cora Frazier 23 Fear of Missing Out

ANNALS OF MEDICINE

Eyal Press 24 A Deadly Principle
Cervical cancer and Alabama's Medicaid policy.

A REPORTER AT LARGE

Rachel Aviv 32 Dancer in the Dark
An artistic passion turns lethal.

SHOWCASE

Jeff Chien-Hsing Liao 42 Testing Times

LETTER FROM YANGQUAN

Jiayang Fan 44 The Friendship and Love Hospital
China's struggles with end-of-life care.

SKETCHBOOK

Roz Chast 51 "Home Sweet Home (So Far)"

FICTION

George Saunders 54 "Love Letter"

THE CRITICS

A CRITIC AT LARGE

Elizabeth Kolbert 58 *How pandemics shape human history.*

BOOKS

Jill Lepore 62 *Loneliness studied.*
Sheila Heti 65 *The letters of Tove Jansson.*
67 Briefly Noted
Hilton Als 70 *The poetry of Carolyn Forché.*

THE THEATRE

Alexandra Schwartz 75 *With venues dark, performances move online.*

MUSICAL EVENTS

Alex Ross 78 *"Sweet Land," and outdoor opera interrupted.*

POP MUSIC

Hua Hsu 80 *Yaeji's atmospheric dance music.*

POEMS

Beth Bachmann 36 "Mask"
José Antonio Rodríguez 48 "Shelter"

COVER

Chris Ware "Bedtime"

DRAWINGS *Barbara Smaller, Amy Hwang, P. C. Vey, Harry Bliss and Steve Martin, Brendan Loper, Justin Sheen, Edward Steed, Sofia Warren, Tom Chitty, Joe Dator, John O'Brien, Teresa Burns Parkhurst* SPOTS *Richard McGuire*

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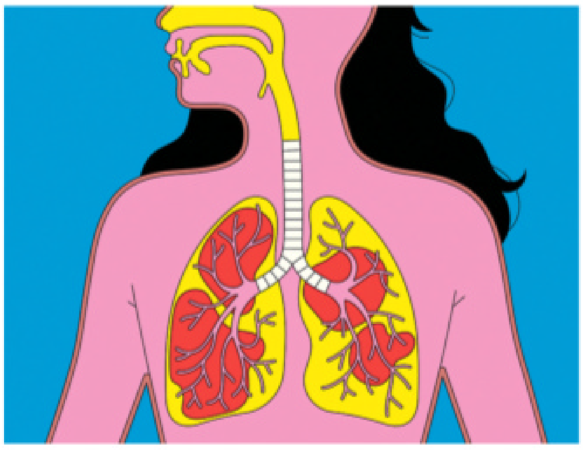
Liana Finck (*Sketchpad, p. 15*) is a *New Yorker* cartoonist. Her latest book is "Excuse Me."

THIS WEEK ON NEWYORKER.COM



ELEMENTS

Carolyn Kormann reports on the science, history, and evolutionary trajectory of the novel coronavirus.

DISPATCH

How do you shelter in place if you don't have a home? Eliza Griswold on homelessness and COVID-19.

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LEFT: LAURA EDELBACHER;
RIGHT: JEFFREY STOCKBRIDGE FOR THE NEW YORKER

THE MAIL

DISTURBING THE PEACE

As was true for Peter Hessler, the Peace Corps was a formative experience in my life and helped make me the person that I am today ("Broken Bonds," March 16th). During my posting in Guayaquil, Ecuador, where I worked in community development from 1965 to 1967, the program showed me—a small-town idealist with no idea what to do with my life—that my vocation was to teach. Before I returned to the United States, a community leader told me that they never understood why we came there, why we stayed, and, now, why we were leaving. The truth is, I wanted to be part of something bigger than myself and to come home a better person. Learning Spanish and living abroad indisputably enhanced my fifty-year career in education.

I am appalled by the roles that Senators Marco Rubio and Rick Scott played in closing the Peace Corps's China program. Americans are gaining more than they realize with the Peace Corps, which has produced not only knowledgeable teachers but also business leaders, social entrepreneurs, civil servants, journalists, and policymakers. Just compare the Peace Corps's China budget for 2018, $4.2 million, with the nearly one trillion dollars spent so far on the conflict in Afghanistan, and then compare the results.
Margot Kinsey Jones
New York City

I sympathize with Hessler's concern regarding the exit of the Peace Corps from China, but I was surprised that he did not write more explicitly about Xi Jinping, whose rise signalled a key geopolitical shift and further limited the kinds of liberties that Hessler found integral to his experience. I studied in China as a high-school student in 2012. When I returned, five years later, I was struck by the changes affecting foreigners and locals alike, from a concerted campaign of ideological guidance in universities to a notable increase in censorship. The memorable incidents that Hessler recounts, such as showing his class an absentee ballot for the 1996 Presidential election and sharing "banned books" with a colleague, arose from the cracks in the Chinese Communist system. But, as China experts such as Elizabeth Economy have observed, Xi has strengthened the system, to the extent that finding those gaps is ill-advised, even dangerous, for foreigners. Hessler does acknowledge that Chinese citizens today "are often more tolerant and aware" despite the Great Firewall's being "more sophisticated than ever," but, by attributing the Peace Corps's closure largely to anti-China sentiment in the U.S., he doesn't fully reckon with the fact that Xi's China may no longer be among the "interested countries," willing to at least tacitly accept the Corps's mission.
Jacob Pagano
Los Angeles, Calif.

As a Peace Corps volunteer who served in China from 2012 to 2014 and who later worked as the China Desk Officer at the Peace Corps headquarters, in Washington, D.C., from 2015 to 2017, I read Hessler's piece as a eulogy for Peace Corps China. My "micro-history," to use Hessler's term, with China covered the rise of Xi Jinping, the Umbrella Revolution, in Hong Kong, and a remarkable reduction in rural Chinese poverty, including among most of my college-age students. It also comprised meeting and marrying my Chinese wife, returning to a United States where many children learn Mandarin in school, and watching dozens of teams race dragon boats on the Potomac. The Corps's work with China will likely appear even more precious in hindsight: a radical collaboration of Chinese and American public servants who believed in development through bilateral education and exchange, even amid difficult political and economic circumstances.
Russell Evans
Arlington, Va.

◆

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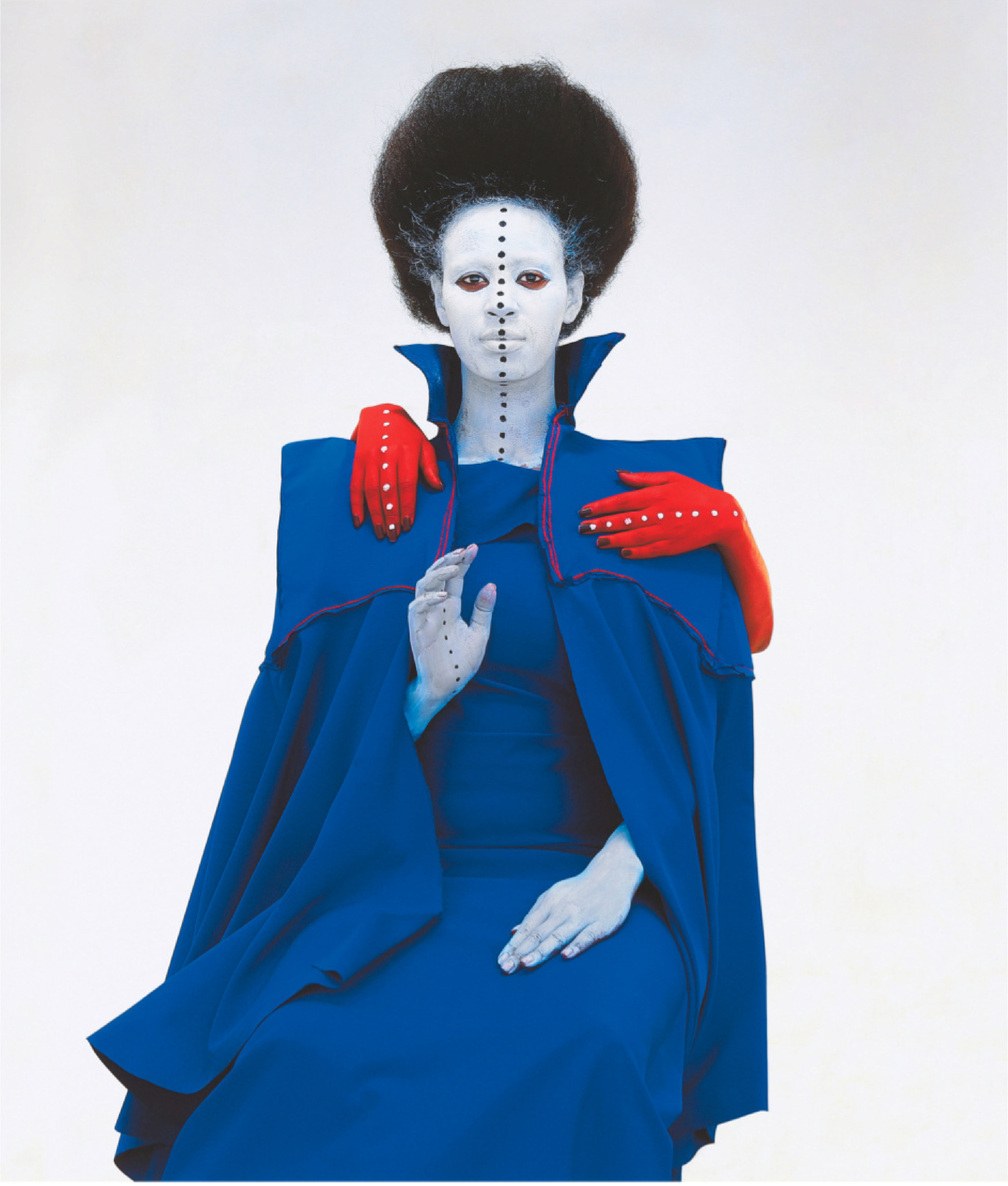
In an effort to slow the spread of the coronavirus, New York City museums, galleries, theatres, music venues, cinemas, and restaurants have closed. Here's a selection of culture to be found online and streaming.

APRIL 1 – 7, 2020

GOINGS ON ABOUT TOWN



Like all museums in New York City, MOMA is closed until further notice. But you can still see eighty-four thousand pieces from its collection online at **MOMA.org.** "All in One" (above), from 2016, is by the gifted photographer Aïda Muluneh, who left her native Ethiopia as a young child and later got her start taking pictures for the Washington *Post*. A decade ago, Muluneh returned home to Addis Ababa, where she divides her time between making art and her work as a photojournalist.

MUSIC

Selections to listen to online.

Thomas Adès: "Adès Conducts Adès"

CONTEMPORARY CLASSICAL Thomas Adès wrote the Concerto for Piano and Orchestra for the pianist Kirill Gerstein, and the composer himself conducted the Boston Symphony Orchestra in the work's world première, last year. This live recording captures the zany energy of Adès's composition, which at times sounds like the spontaneous revolt of a lounge pianist spinning off on his own trajectory. Adès modernizes rather than reinvents the concerto form. The score calls for the pianist to play in running octaves, as tradition dictates, but, in the second movement, the octaves stumble on tone clusters that Adès has sprinkled in their way. It's reverential, cheeky, and lots of fun. This release pairs the concerto with Adès's "Totentanz" ("Dance of Death"), a setting of an anonymous German text that accompanied a fifteenth-century frieze that was destroyed by Allied bombing in the Second World War. The whole orchestra seems to heave itself forward in a broken minuet as Death (the impressive baritone Mark Stone) calls upon a large cast of characters (all portrayed by the game mezzo-soprano Christianne Stotijn) to join him in a final, fateful dance.—*Oussama Zahr*

Brooklyn Rider: "Healing Modes"

CHAMBER MUSIC "Healing Modes," the newest album by the adventuresome string quartet Brooklyn Rider, is based on a program the group refined in concerts during the past few years, but its core theme—the interconnection of music and healthfulness—could not possibly be more relevant or necessary than it is currently. In a season awash with now postponed events intended to celebrate the two-hundred-and-fiftieth anniversary of Beethoven's birth, this collection is inspired by the third movement of the composer's String Quartet No. 15 in A Minor, a luminous hymn conveying his thankfulness after he recovered from a life-threatening illness, in 1825. The quartet's five movements are interwoven with five newly commissioned works that explore complementary notions. Reena Esmail and Gabriela Lena Frank, like Beethoven, expressively recall personal maladies overcome; Matana Roberts and Caroline Shaw address the U.S.-Mexico border conflict and the Syrian refugee crisis, respectively, as afflictions of the body politic; Du Yun turns inward and outward at once, evoking the societal stigma of mental illness. The concept proves sound: the juxtapositions are illuminating, the playing persuasive, and the timing almost impossibly serendipitous.—*Steve Smith*

Miles Davis: "Bitches Brew"

JAZZ If Miles Davis was looking for a commercial breakthrough with his 1970 album "Bitches Brew," he certainly went about it backward. Assembling a sprawling crew of players, he set off loose musical sketches that were ultimately edited to tracks stretching as long as twenty-seven minutes—not exactly the best way to finagle oneself onto the mainstream airwaves. That "Bitches Brew" turned out to be a best-seller (by jazz standards) and jump-started the seventies fusion movement, which continues to inspire artists of all genres, was a testament to Davis's instinctual cunning. Now, fifty years after its initial release, the record still sounds wild, its mashup of minimalist funk, maximalist textures, and slashing improvisation daring and dangerous. It's taken as long for adventurous musicians to truly come to grips with the album's audacious aesthetic of throwing it against the wall and seeing if it sticks. "Bitches Brew," offensive title and all, remains the essence of disturbing beauty.—*Steve Futterman*

Brian Eno / Roger Eno: "Mixing Colours"

AMBIENT For decades, Brian Eno, the visionary known for coining the term "ambient music," has collaborated with his younger brother, the pianist Roger Eno. Last week, they released their first joint album, "Mixing Colours," which compiles fifteen years of what Roger has called "a back-and-forth conversation" that unfolded as they traded swatches of sound and filtered music through each other's imagination. The tension between Roger's ornate keys and Brian's parsimonious, tonally driven production results in sketches that are muted yet lucid, like the iciest shades on a paint palette.—*Julyssa Lopez*

Matthias Goerne: "Beethoven Songs"

ART SONGS Beethoven's vocal music is sometimes criticized for the instrumental quality of its melodies—that is, it doesn't account for a singer's need to breathe—but that problem doesn't present itself in Matthias Goerne's new album. With his dark, luxuriant timbre and capacious breath support, the German baritone presents an assortment of Beethoven lieder that culminates in the song cycle "An die Ferne Geliebte." His carefully modulated tone color, gorgeous from first to last, inhabits the narrator's wistfulness and builds patiently to a climax. Goerne's pianist, Jan Lisiecki, an international soloist, shows off a bit at the keyboard, filling in some of the action that the singer smooths over with his luscious legato.—*O.Z.*

Jon Hassell: "Vernal Equinox"

AMBIENT The composer Jon Hassell has long referred to his music as "Fourth World"—an amalgam of Indian classical music (he studied with the vocalist Pandit Pran Nath), Miles Davis's electric explorations in the seventies, and Burundi percussion. Listening to his début album, "Vernal Equinox," from 1977, which was recently reissued on his own label, Ndeya, it's startling just how fully formed his signature blend was upon arrival. Hassell's heavily processed trumpet weaves through beguiling electronic drones like a snake through a velvet-lined maze; occasionally, his playing evokes an elephant stampede in some far-off mist. There's a rapturous sense of stasis here, broken up by captivating details—talking drums, shards of birdsong, the chattering insects of the album's two-minute coda—that slip into the foreground.—*Michaelangelo Matos*

Shabaka and the Ancestors: "We Are Sent Here by History"

JAZZ "We Are Sent Here by History"—a new album by Shabaka and the Ancestors, a South African ensemble led by the British-Barbadian saxophonist and clarinettist Shabaka Hutchings—is meant to sound apocalyptic. Thematically, it centers on the idea that systems and institutions built on inequality are intrinsically built to fail; musically, it encapsulates the disquiet formed in the wake of such collapse. The lyrics both soothe and challenge, the drumming rises and falls like a pulse, and

INDIE POP

Half Waif's new album, "The Caretaker," evokes the stifling feeling of wanting to force time forward and charge into a future that's nebulous and perpetually out of reach. Her voice, almost on the verge of breaking, pierces through baroque choral loops on "Ordinary Talk" as she describes quotidian moments imbued with dull pain: "Sitting in the dark, dreaming up a song, crying in my coffee." Later, on "In August," she recounts a slowly passing year and wonders, "Am I meant to find some strength in me, hidden where I'll never see it?" These songs inadvertently speak to a period of uncertainty and isolation, and, though they're weighty, Half Waif's sombre elegance reflects the steely-eyed strength of a person who might just get through it.—*Julyssa Lopez*

OPPOSITE: PHOTOGRAPH BY AÏDA MULUNEH / COURTESY MOMA; RIGHT: ILLUSTRATION BY PING ZHU

PODCAST DEPT.

ILLUSTRATION BY ROSE WONG

Listening to others' voices can feel like a lifeline to sanity during social isolation—especially in podcasts that connect but don't depress. **"Over the Road,"** from Radiotopia and *Overdrive* magazine, is rich with the sounds of Jake brakes, truck stops, wildcatters, and harmonica as it immerses listeners in the history and the culture of long-haul trucking. It's hosted by the smooth-voiced Paul (Long Haul Paul) Marhoefer, a forty-year veteran of "pulling reefers—loads of lettuce, pork loins, watermelons—food, that is," across the country, "out there with the cow trucks, the chicken haulers, the hopper bottoms laden with grain, rolling through the nameless fields of the great alone." (He's also a writer.) In a COVID-19-era update, Marhoefer checks in, from a dairy run in Florida, to reassure listeners about the supply chain. "We're still trucking out here," he says.—*Sarah Larson*

the reeds cry out—their improvisations an embodiment of real-world uncertainty. An album conceptualized, in Hutchings's words, as "a meditation on the fact of our coming extinction as a species" and "a reflection from the ruins" is either right on time or an unwelcome prophecy, depending on one's perspective. Still, there is something refreshingly honest about hope wrestling with doom and something liberating about getting lost in music that doesn't seek answers or grasp for calm. Shabaka and the Ancestors instead give voice to the urgency of chaos, calling on each of us to raise from the ashes a better future for all.—*Briana Younger*

The Weeknd: "After Hours"

POP / R. & B. One of the biggest challenges the Weeknd has faced is also a prison of his own making. His début mixtape, "House of Balloons," from 2011—an anonymous, coke-riddled haze of pleasure and self-loathing—helped to deconstruct notions of R. & B. and reorient the genre around mood. Such inclinations have since been at odds with the splashy, Max Martin-produced version of the singer, whose upbeat disco pop doesn't render angst quite as effectively. "After Hours," the Weeknd's fourth and latest album, finds his most solid ground between the two modes, all echoes and heartbreak caked in the dark, synthy hues of eighties pop. Material possessions and success contrast with the open wound of a breakup, creating a tension that takes shape in the swirling, cinematic expanse of songs from "Hardest to Love" to "Faith." In the album's final moments, he beautifully executes his staple party trick: "I keep telling myself I don't need it anymore," he wails over an electric bed of reverb, blurring the line between love and vice until it—and he—disappears.—*B.Y.*

PODCASTS

"Heavyweight"

Hosted and produced by the gently funny Jonathan Goldstein, "Heavyweight" provides the pleasures of reflecting on the past without the burdens of thinking about oneself—or the present. It solves mysteries of an unusual genre: about the moment in a person's life when everything changed. Often, it involves a reunion. In a fourth-season episode, Goldstein introduces us to a man who, as a ten-year-old, in 1974, embarked on a three-day bike trip, across two states, with three friends—unsupervised. "Ah, the seventies," he says, as funky flute music plays. "All of us crying out 'Dy-no-mite!' when life was good and 'I am not a crook' when life was bad." The bike trip, inconceivable to rational beings today, did happen—and, we discover, played startlingly different roles in the lives of his long-lost companions. Goldstein's sensibility, which leavens the heaviness as stories unfold, seems to say, We're all a bit absurd, and so is the world; let's confront and enjoy the absurdity together. When the existential realizations come, they hit like a knockout.—*Sarah Larson*

"In Our Time with Melvyn Bragg"

This podcast, a weekly BBC Radio 4 program beloved in the U.K. since 1998, consists of conversations between its bluff, no-nonsense host and three thoughtful academics about some worthy cultural or historical subject—George Sand, solar wind, the siege of Paris, the Gin Craze. Bragg dives right in: "Hello, 'Four Quartets' is T. S. Eliot's last great poem"; "Hello, Germaine de Staël was born in Paris in 1766, where her father was finance minister to Louis XVI and her mother held dazzling salons." (Barrelling ahead, he says things like "Let's zoom in on Pushkin.") For American podcast enthusiasts, "In Our Time" can make for a refreshing change of pace: no self-effacing narrative intimacy, no inventive sound design, no artfully revealed surprises, no keeping up with current events. Listening to it provides a welcome perspective—like reading a classic novel, it's escapist but edifying, and exactly what we need.—*S.L.*

ART

Farah Al Qasimi

When the Public Art Fund asked this Emirati photographer to conceive of a public-art project for outdoor spaces usually reserved for advertisements around New York City, she came up with "Back and Forth Disco," a series of effervescent color pictures taken in immigrant neighborhoods across the five boroughs. Whether she is documenting a chandelier in a Yemeni-owned bodega in Ridgewood, Queens, or two men in a Palestinian-run barbershop in Bay Ridge, Brooklyn, Qasimi puts a jubilant spin on living between cultures. Qasimi typically conceals a subject's identity within her compositions, a device that feels like a tender gesture of discretion, even protection, in a city where private lives (until recently) so often play out in public. In the elegant portrait "Woman in Leopard Print," a sylph in a chic hijab turns away from the camera and toward a mirrored compact, which reflects one of her eyes back at the viewer. The frame within the frame recalls the cropped, mascara-laden eye in Man Ray's famous Surrealist picture "Tears." Images of Qasimi's newest photographs, the series "Funhouse," are online (at helenaanrather.com), and the Public Art Fund recently added a video interview about "Back and Forth Disco" to its Web site.—*Andrea K. Scott (publicartfund.org)*

"The Dinner Party"

For homeschool instructors developing a feminist-history curriculum on the fly, the Brooklyn Museum provides a no-nonsense resource with its digital presentation of Judy Chicago's monumental installation "The Dinner Party," from 1974-79. (The piece is on permanent view at the museum, which is temporarily closed.) Its triangular banquet table, set for thirty-nine illustrious guests, is awe-inspiring in person, its theatrical grandeur heightened by the handcrafted intricacies of its ceramic plates and needlework elements. A brigade of volunteer china painters and embroiderers worked to realize Chicago's distinctly vulvar designs for her place settings, which were infamously eyebrow-raising at the time, and their palpable labor is part of the magic. But online viewing has its advantages, too. You can read detailed biographies of the epoch-spanning women Chicago envisioned at her table—figures as varied as Hatshepsut, Hildegard of Bingen, Sojourner Truth, and Georgia O'Keeffe. Then, of course, there is the fascinating life of the artist herself. Chicago has long been a lightning rod for impassioned feminist conversations about inclusion, representation, and art-making, which should be of interest to all students of "herstory."—*Johanna Fateman (brooklynmuseum.org)*

Queer Zine Archive Project

As virtual galleries spring up overnight, this nonprofit archive, maintained in Milwaukee, is well into its second decade as a searchable database and browsable reading room. Self-published art books, agitprop, D.I.Y. instruction, erotica, poetry, fiction—and anything else you could conceivably photocopy—are all represented. The earliest work you can view is the substantial typewritten and hand-illustrated Spanish-language *Somos No. 2,* from 1974, by the Homosexual Liberation Front of Argentina; among the newer uploads is *From Sheytls to Yarmulkes,* from 2015, by Sammi Siegel, a color cut-and-paste zine about the particular challenges faced by trans Jews. In between are classics of queercore, such as seven issues of the wickedly funny *J.D.s*, distributed from 1985 to circa 1990, by the Toronto punk legends G. B. Jones (known for her lesbian reimagining of Tom of Finland's œuvre) and the filmmaker Bruce LaBruce; missives from the riot-grrrl movement; and ephemera from the AIDS crisis, including a 1997 Sex Panic! pamphlet. (The influential and beloved art historian Douglas Crimp, who died last year, is listed as an author of the latter.) Almost any search term you enter will deliver both laughs and lessons in mutual aid.—*J.F. (qzap.org)*

MOVIES

Cinema Verite

Shari Springer Berman and Robert Pulcini directed this exhilarating and insightful drama, from 2011, about the production, in the early nineteen-seventies, of the twelve-hour PBS documentary series "An American Family." It's a feast of performance, starring James Gandolfini as the producer Craig Gilbert, who recruits the solidly middle-class Loud family, of Santa Barbara, California—Pat (Diane Lane), Bill (Tim Robbins), and their five adolescent children—for his project. As Gilbert discovers and displays conflict between Bill and the eldest Loud son, Lance (Thomas Dekker), who is gay and preparing to move to New York, his own involvement with the family sparks added tension, as does the constant presence of the husband-and-wife camera-and-sound team (Shanna Collins and Patrick Fugit). For good measure, the fictional scenes are ingeniously interwoven with footage from the actual documentary series. The result is a kaleidoscopic merging of fact and speculation that exposes the mighty emotional upheavals inherent in the cinéma-vérité process and in the era at large.—*Richard Brody (Streaming on Amazon, iTunes, and other services.)*

Colossal

The director Nacho Vigalondo's wildly imaginative mashup of a self-discovery drama and a sci-fi monster thriller is giddy yet substantial. Anne Hathaway plays Gloria, a hard-drinking New York blogger whose boyfriend (Dan Stevens) throws her out of his apartment. She retreats to her late parents' empty house in her rustic home town, bumps into a childhood friend (Jason Sudeikis), gets a part-time job in the bar he owns, and tries to take stock of her life. Then she and the world are gripped by the sudden appearance of a gigantic monster, which wreaks havoc in Seoul for only a few minutes every day. The connection between Gloria's story and the monster's is too good to spoil; its metaphorical power brings a furiously clarifying insight to Gloria's troubles and portrays them as the woes of humanity at large. The trope has a long setup, but it's worth it—and Hathaway's self-transformative, forceful performance brings Vigalondo's strong idea to life. Released in 2016.—*R.B. (Streaming on Hulu and other services.)*

Emma.

Anya Taylor-Joy, who made such an impact in "The Witch" (2015), stars in a slightly different costume drama, one with improved interior décor and less demonic possession. In this new adaptation of Jane Austen's novel, Taylor-Joy plays Emma Woodhouse, whose matchmaking causes no end of trouble. Mia Goth is Harriet Smith, the malleable innocent whom Emma endeavors to link with a range of

ONLINE MONOLOGUES

ILLUSTRATION BY ANTONIO SORTINO

What is theatre without a live audience? We're about to find out. With shows grounded, artists and theatre companies are finding inventive ways to adapt. **The 24 Hour Plays,** which specializes in short works that are written and produced in a daylong time frame, sprang into action earlier this month. On the evening of March 16, twenty actors were paired with twenty playwrights. Each writer had until 9 A.M. the next morning to write an original monologue, which an actor then self-recorded by that night. In "A Story of Survival," by David Lindsay-Abaire, Rachel Dratch plays a beauty vlogger who recounts her feud over the last bottle of hand sanitizer at Costco. In Christopher Oscar Peña's "we were dazzling once," Hugh Dancy is a poetic soul leaving an account of his last relationship before the apocalypse. Tavi Gevinson plays a high-strung Reiki instructor in "Live, Laugh, Life," by Jenny Rachel Weiner. And, in Jesse Eisenberg's "An Immodest Proposal," Richard Kind plays himself, an actor with an end-of-days proposition: "Hollywood, I'd like to play a Gentile." All twenty videos are up at 24hourplays.com.—*Michael Schulman* unsuitable men: a minister (Josh O'Connor), a bounder (Callum Turner), and a wealthy neighbor, Mr. Knightley (Johnny Flynn), who has other designs in mind. The film, directed by Autumn de Wilde from a screenplay by Eleanor Catton, undergoes a notable change: initially smart, silly, primped, and somewhat pleased with itself, it grows more serious as time goes on. The fact that the heroine follows the same arc in her acquisition of wisdom is no coincidence. With Bill Nighy as Emma's nervous father.—*Anthony Lane (Reviewed in our issue of 3/2/20.) (Streaming on Amazon and other services, and on video on demand.)*

Goodbye Charlie

Vincente Minnelli's extravagant inside-Hollywood comedy, from 1964, based on a play by George Axelrod, is a fantasy of life and death. Debbie Reynolds stars as the female reincarnation of a philandering male screenwriter who was killed by his lover's husband. She discloses her identity only to the writer's best friend (Tony Curtis) and quickly becomes the movie colony's heartthrob—numbering among her conquests the killer himself, Sir Leopold Sartori, a producer (played by Walter Matthau with unctuous swagger and an uproarious Hungarian accent). A series of subplots regarding diaries, scripts, and forthcoming movies suggests that the stories cooked up—and lived out—in the bedrooms and the boardrooms, the mansions and the yachts, are the very ones coming soon to the public's screens. Minnelli embeds melodramas of sexual identity in the ribaldry, turns a riotous nocturnal car chase from comedy to horror, and brings in a snooping detective to evoke the lurid tones of a film noir.—*R.B. (Streaming on Amazon, Vudu, and other services.)*

The Intern

This earnest, effusive haut-bourgeois fantasy, by the writer and director Nancy Meyers, runs roughshod over rational skepticism with the force of life experience. It's set in the overlap of two generations of Brooklyn businesspeople. Jules (Anne Hathaway) has built a booming Internet startup, but her long workdays are straining her marriage to Matt (Anders Holm), a stay-at-home dad. Into Jules's stylish Red Hook offices skips a fairy godfather named Ben (Robert De Niro), a retired executive and lonely widower who's a "senior intern." Jules, under pressure from investors, increasingly relies on the wise, discreet, and admiring volunteer, who becomes a key presence in both her business and her household. For all its nostalgic riffs about styles and virtues forged before the Age of Aquarius, the movie's real subject is the sentimental union of seeming enemies, the disruptive young entrepreneur and the old-school company man. Meyers, an insider's insider, dispenses her vision of feminism—and of independence—via the man in the gray flannel suit.—*R.B. (Streaming on Amazon, iTunes, and other services.)*

The Rest I Make Up

Michelle Memran's intimate and exhilarating documentary portrait, from 2018, of the playwright María Irene Fornés unfolds the details of their decade-plus collaboration in ample, illuminating discussions between the duo. Fornés, a crucial theatrical innovator since the nineteen-sixties, speaks of her unbridled self-revelations to the camera, which she calls "her beloved"—and it certainly loves her back. She exerts the hypnotic force of stardom, and her offhanded yet urgent remarks resound with life-tested literary authority. But tragedy is built in from the start: Fornés's bouts of memory loss prove to be the onset of Alzheimer's disease. Though her perception and imagination remain vivid and vital, she can no longer recall recent activities—such as a hearty visit to her native Cuba, which Memran films. The movie sketches the background of Fornés's remarkable life and career with interviews and archival footage, while highlighting her enduring creative inspiration on the wing, long after the end of her playwriting career.—*R.B. (Streaming on Women Make Movies and Kanopy.)*

Story of a Love Affair

In his first feature, from 1950, Michelangelo Antonioni dramatized the power of mass culture and business—and the bourgeoisie, who controlled those spheres of activity and embodied their values. An aging, wealthy Milan industrialist hires a detective to investigate the past of his young wife, Paola (Lucia Bosè). When her former lover, Guido (Massimo Girotti), contacts her about the detective's inquiry, the pampered and restless Paola reignites their romance. Antonioni captures their passion with architectural precision; he presses his lovers into hard-edged corporate and domestic spaces by way of graphically etched, high-contrast camerawork that emphasizes the coldly thrilling modernism of tall buildings, progressive urbanism, and avant-garde design. In Bosè, he found just the actress to embody that style's dark allure. She shares the sleek sculptural power of the world that Paola inhabits, wearing the sharply angled artifices of high fashion as if made for them and evoking, with a coolly glowing stillness, fire encased in marble. In Italian.—*R.B. (Streaming on Amazon and Kanopy.)*

For more reviews, visit
newyorker.com/goings-on-about-town

WHAT TO STREAM

The annual New Directors/New Films series, which would have run through April 5, has introduced New Yorkers to many great discoveries since its founding, in 1972, including **"Slacker,"** Richard Linklater's second feature, which screened there in 1991 (and is streaming on Amazon, YouTube, and other services). It's a brilliant roundelay of idiosyncratic connections between students, ex-students, and eccentrics in Austin, Texas, where Linklater lived; he even plays the first of these characters, appearing in a bravura three-minute take in which he tells a cabdriver about his strange dreams of alternate universes. The film presents the teeming weirdness of daily life in Austin as a swarm of individual alternatives, each spinning wildly out of control and crashing into one another's active fantasies to unleash vast creative energy. The overarching theme is paranoia—many of the characters deliver hectic monologues about nefarious official coverups and deceptions, or lash out with absurd violence. Linklater presents the breezy comedy of casual wandering and easy chat as the artistic ferment of local bands and filmmakers—and as a critique of a country that's desperately disconnected from its people.—*Richard Brody*

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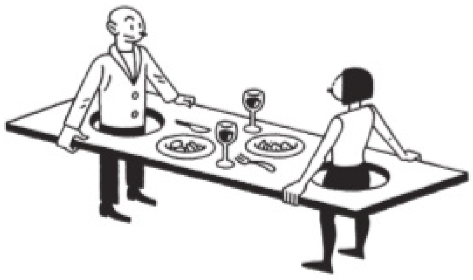

TABLES FOR TWO

Takeout and Delivery

Last week, like many New Yorkers, I tried to support a few of the restaurants I love by ordering takeout and delivery. As of March 17, all restaurants in the city had been banned from serving customers in their dining rooms, and, though many had closed completely, some were scrambling to adapt, now with skeleton crews. I was impressed by the creativity of their fallback plans, and grateful to be eating food that afforded me fleeting respite from worry. But each meal felt like a distress signal from a marooned ship.

Roberta's, the beloved Bushwick pizzeria, delivered D.I.Y. meal kits: balls of oiled pizza dough with tomato sauce and mozzarella; fresh tagliatelle with oxtail ragù and gremolata bread crumbs. From Cote, an upscale Korean restaurant in the Flatiron district, I ordered a magnum of Beaujolais and a "steak care package": four aged rib eyes, raw, with detailed instructions for how to cook them, plus pungent *ssamjang*, a custom salt mix, and an array of *banchan*, including kimchi and crunchy pickled chayote squash. A roll of toilet paper was also tucked into the box.

From Le Crocodile, an elegant new Williamsburg brasserie that I reviewed just weeks ago, I ordered the roast chicken that had helped make the place an instant hit, now served at room temperature as part of a family-style meal, along with a creamy potato-leek soup, the fixings for a celery-and-Stilton salad, a leek gratin, and chocolate-chip cookies. I got a chicken pot pie, too, the dark-meat-and-wild-mushroom filling cooked but the pastry raw; after ninety minutes in the oven, it turned golden and made my kitchen smell like Heaven.

It was comfort food, bar none, but the courier who delivered it wore latex gloves and a mask. Just a few days later, Le Crocodile closed its kitchen completely, fearful for the safety of its staff. I waited, eagerly but patiently (unlike the takeout crowds that have reportedly been mobbing the sidewalk outside the usually eat-in-only Italian restaurant Carbone), for a shipment from MáLà Project, a Chinese restaurant that normally specializes in dry pot but had started offering a selection of "Quarantine Foods," including jarred sauces and fresh noodles. Then I got an e-mail: "We will no longer be able to fulfill any takeout and delivery orders."

I'll be rationing a precious loaf of sesame sourdough baked by Adam Leonti, whose restaurant Leonti was the best on the Upper West Side before its untimely closure, earlier this year. Just prior to the shutdown, he was set to open a new place, Sofia's Panificio e Vino, in Little Italy. At the moment, you can get his superlative loaves (plus minestrone, chicken cacciatore, and fresh ravioli) to go, but who's to say for how long?

It seems increasingly untenable, and unsafe, to expect restaurants to keep themselves afloat. Last Tuesday, a group of New York's top restaurateurs, including Tom Colicchio and Danny Meyer, wrote a joint Op-Ed in the *Times* describing the massive aid needed to prevent their industry from crumbling. Takeout, they explained, is "barely enough to keep anyone employed, given the costs of rent and insurance for sit-down restaurants. Our economic model requires people in seats."

Restaurants, and the people who work in and around them, are essential to the fabric and the functioning of New York, and of society. In recent days, some have converted into makeshift soup kitchens, providing meals to the countless servers, bartenders, bussers, dishwashers, and cooks who find themselves suddenly without paychecks. Eric Sze, the chef and co-owner of 886, a Taiwanese restaurant in the East Village, started his career in college, with a one-man company called Scallion Foods, biking beef-noodle-soup kits across Manhattan. In the past two weeks, he's returned to his roots, working largely alone to make bento boxes with braised pork belly or five-spice tofu in addition to soup. They're still available, in limited quantity, for pickup and delivery, but most of the food he's cooking, funded by donations, is going to hospitals, to feed their lionhearted staffs.

—*Hannah Goldfield*

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THE NEW YORKER

THE TALK OF THE TOWN

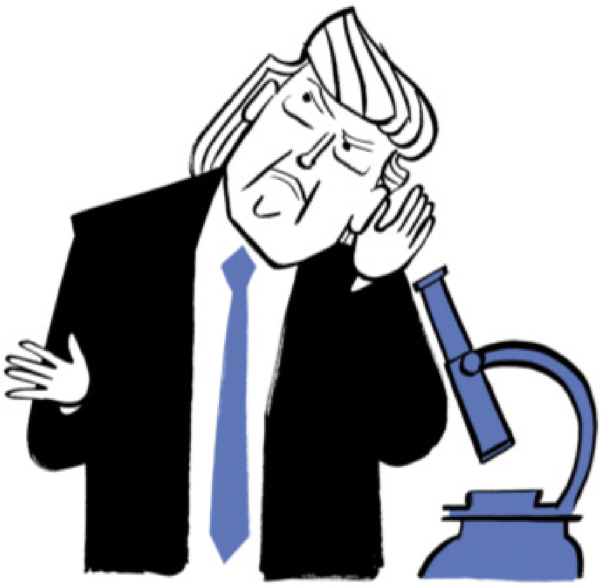
COMMENT
UNSCIENTIFIC METHOD

On March 18th, researchers in France circulated a study about the promising experimental use of hydroxychloroquine, an anti-malaria drug, in combination with azithromycin, an antibiotic, as a treatment for the disease caused by the coronavirus. The study was neither randomized nor peer-reviewed, and other scientists soon criticized its methodology. But Tucker Carlson, on Fox News, highlighted the work. The next day, President Trump promoted hydroxychloroquine's "very, very encouraging early results." He added, mentioning another unproven therapy, "I think it could be, based on what I see, it could be a game changer."

At a White House press briefing on March 20th, a reporter asked Anthony Fauci, the director of the National Institute of Allergy and Infectious Diseases, whether hydroxychloroquine could be effective in treating COVID-19. "The answer is no," Fauci said, before yielding the microphone to Trump, who countered, "May work, may not. I feel good about it. That's all it is, just a feeling, you know, smart guy." A few days later, Tedros Adhanom Ghebreyesus, the director-general of the World Health Organization, said, "Using untested drugs without the right evidence could raise false hope and even do more harm than good."

Trump's quackery was at once eccentric and terrifying—a reminder, if one was needed, of his scorn for rigorous science, even amid the worst pandemic to strike the country in a century. Yet his conduct typified his leadership as the crisis has intensified: his dependency on Fox News for ideas and message amplification, his unshakable belief in his own genius, and his understandable concern that his reëlection may be in danger if he does not soon discover a way to vanquish COVID-19 and reverse its devastation of the economy.

New York City now faces a "troubling and astronomical" increase in cases, according to Governor Andrew Cuomo, and the emergency is overwhelming hospitals, straining drug and equipment supplies, and threatening to cause a shortage of ventilators. The grim course of events in the city is a "canary in the coal mine" for the rest of the country, Cuomo said, and leaders elsewhere must take decisive action lest they, too, become inundated. Trump, though, spent much of last week promoting a contrarian gambit that has been percolating in the right-wing media. He said that, to revitalize the economy, he would like to lift travel restrictions and reopen workplaces across the country within weeks, perhaps by Easter, which is on April 12th, because, as he put it repeatedly, "we can't let the cure be worse than the problem."



Public-health experts immediately warned against such a reversal of social-distancing rules. "The virus will surge, many will fall ill, and there will be more deaths," William Schaffner, a specialist in preventive medicine at Vanderbilt University, told the *Times*. When a reporter asked the President whether any of the "doctors on your team" had advised him that a hasty reopening was "the right path to pursue," he replied, "If it were up to the doctors, they may say, 'Let's keep it shut down . . . let's keep it shut for a couple of years.'" Public-health specialists have said no such thing; they have spoken of a conditions-based approach ("You don't make the timeline, the virus makes the timeline," Fauci has said), while advising that, to save the most lives, local leaders must wait to lift restrictions in their areas until the data show that the virus has stopped spreading. Trump said that any loosening of rules he might seek around the country—he mentioned Nebraska and Idaho as possible sites—would be "based on hard facts and data," but he also said that he chose Easter as a target date because he "just thought it was a beautiful time."

It is true, as Trump also argued, that enormous job losses and an all but certain recession caused by the pandemic will harm many vulnerable Americans,

ILLUSTRATIONS BY JOÃO FAZENDA

and claim lives, as ill people without health insurance, for example, forgo care or struggle to get it at stressed clinics and hospitals. Yet, at least in the short term, over-all mortality rates fall during recessions; the reasons for this aren't fully clear, but social scientists think they may include the public-health benefits of a decrease in pollution, as a result of the slowing economy. In any event, the case the President made for hurrying an economic revival against the advice of scientists was morally odious; it suggested that large numbers of otherwise avoidable deaths might have to be accepted as the price of job creation.

Public-health officials spoke frankly to the press about the catastrophic prospects of the President's Easter folly. ("President Trump will have blood on his hands," Keith Martin, the director of the Consortium of Universities for Global Health, told the *Times*.) Trump responded on Twitter by lashing out at the "LameStream Media" for reporting such forecasts, calling the press "the dominant force in trying to get me to keep our Country closed as long as possible in the hope that it will be detrimental to my election success." Last Wednesday, after Mitt Romney, the only Republican who voted to convict the President, on a charge of abuse of power, during the Senate impeachment trial, announced that he had tested negative for COVID-19, Trump tweeted mockingly, "I'm so happy I can barely speak." At the White House briefings, surrounded by the sorts of civil servants and experts he habitually disdains, Trump has adapted awkwardly to the role of solemn unifier. When he leaves the podium to tweet nonsense at his perceived enemies, he at least provides his opponents among the country's homebound, screen-addled, and anxious citizenry with a galvanizing dose of his immutable obnoxiousness—a splash of the old new normal.

The journal *Science* asked Fauci why he doesn't step in when the President makes false statements in the briefings. "I can't jump in front of the microphone and push him down," he said. America's public-health system is fragmented and market-driven, conditions that only compound the challenge of quashing COVID-19. In the Trump era, however, decentralization has a benefit: the President is not solely in charge, and in the months ahead governors and mayors will continue to shape the odds of life or death for great numbers of Americans. Last week, Trump reviewed the possibilities for quarantine in New York City, his ravaged home town. He rambled about the stock exchange ("It's incredible what they can do"), before going on to pledge, "If we open up, and when we open up . . . we're giving the governors a lot of leeway" to decide how this should be done. We can only hope so.

—*Steve Coll*

ALL HANDS ON DECK DEPT.

MACGYVERING

We need more ventilators. COVID-19 attacks the lungs; ventilators help you breathe when you're no longer able to do so on your own. There are around a hundred and seventy thousand ventilators in the United States, but, according to worst-case estimates, some nine hundred and sixty thousand people will soon need one. "Ventilators are to this war what missiles were to World War II," Governor Andrew Cuomo said recently.

In this war, the civilians have not been rationing (see: empty toilet-paper aisles; the rush on oat milk; the L.A. *Times* headline " 'We've Never Sold Out of Pork Butt Before' "). But Rosie the Riveter isn't gone—she's just working from home. The other day, Bruce Fenton, of Portsmouth, New Hampshire, posted a call for volunteers on the Web site Medium. He was leading something called the Ventilator Project—a crowdsourced effort to address the shortage. The project's two goals, Fenton wrote, were to help existing ventilator manufacturers ramp up production, and to design an open-source plan for a cheap and simple emergency ventilator that hospitals can use. As inspiration, he reminded everyone that the Apollo 13 astronauts created a carbon-dioxide scrubber from spare parts.

Fenton is not a doctor; he's a blockchain activist. But, in 2019, his son had back-to-back brain surgeries, and he recalls the neurosurgeons using a torque wrench to fasten pins into his son's skull, and several bags of sand to keep his son's head still on the hospital bed. "These were two major surgeries," Fenton said. "And they're talking about how much sand to put in this thing." The surgeons hadn't run out of normal materials; for this procedure, those *were* the normal materials. The takeaway? Doctors are comfortable using weird tools and archaic methods, even outside the context of an emergency.

The Ventilator Project's three hundred and fifty volunteers do most of their brainstorming on the chat app Slack. A few proposals: repurposing CPAP machines (sleep-apnea masks) as ventilators, rigging single ventilators to treat multiple patients, and using grounded airplanes as treatment facilities, in order to take advantage of the overhead oxygen masks. Many participants are medical professionals, such as Stuart Solomon, a Stanford anesthesiologist who is mobilizing equipment that functions similarly to ventilators (like anesthesia machines). Fenton has also recruited lawyers, in the hope that, should a solid design emerge from the project, mass production of these ventilators—and their use in hospitals—won't be stalled by regulators such as the F.D.A. And he has called on "engineers, builders, and MacGyver types who can build a legit ventilator" out of "Home Depot type parts."

Most of the volunteers are MacGyver types. Or they're MacGruber types claiming to be MacGyver types—online, it can be hard to tell the difference. Two weeks ago, a man named Paul Côté, whose specialties include 3-D modelling and computational fluid dynamics, asked, "Could a simple water-electrolysis device work as a makeshift oxygen concentrator?"

"Risk of explosion from hydrogen," a former tech engineer named Mark Proffitt replied. The next week, Proffitt made another contribution: he posted a YouTube video titled "Ultra-Jank Ventilator," in which a constantly cursing Canadian man shows off his glorified gravity bong. ("Might be more peaceful to suffocate than have that thing hooked to you," one person commented.)

How janky is too janky, in an emergency? "Doctors aren't stupid," Fenton said. "They're not going to use some junk

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ventilator unless they need to. Hopefully it won't be junk. Maybe it'll be half as effective as a normal ventilator, but that's a heck of a lot better than no ventilator."

One promising idea is to return to the old-school ventilators of the past. Current designs are more sophisticated than necessary for treating the average COVID-19 patient, and extremely difficult to produce in, say, a Tesla factory. Dave Empey is a respiratory therapist who has worked with ventilators since the seventies, before battery backups, digital displays, and remote monitoring. He wrote, "In my opinion it's possible to pare down these design requirements."

"Anyone have experience with the Harry Diamond Labs 'emergency army respirator'?" Alex Izvorski, a biomedical engineer, asked, referring to a sixties-era controlled-pressure ventilator. "I'm trying to get one of the engineering prototypes—from a museum, of all places."

Fenton is sure that the group will be able to build more ventilators, whether of vintage design or fashioned out of vacuum-cleaner bags. (A team in Italy has been successful in hacking snorkelling gear; five hundred patients are now using it to breathe.) But, as is the case with Bitcoin, Fenton anticipates a "last-mile problem." "Let's say we build twenty thousand ventilators in a World War II-style effort," he said. "It could come down to, O.K., who is physically at the hospital to take delivery?" Or, "How does a doctor know that it's O.K. to use these ventilators? Do you print a piece of paper saying 'This has emergency F.D.A. approval' and stamp it on each one?" He went on, "Can a doctor train up on this equipment in an hour?" And what if there are enough ventilators, but not enough doctors to operate them? What will we do then?

—*Tyler Foggatt*

HOT MEAL DEPT.

STILL OPEN

People still have to eat. The soup kitchen at the Church of the Holy Apostles, the largest in the city, still feeds lunch to many of the hungriest among us, as it has done every weekday, including holidays, for thirty-eight years. A major fire in the church in 1990 didn't stop it, nor did September 11th or Superstorm Sandy. It has never missed a day. Lately, the serving station has been moved outdoors, to the church's front gate, on Ninth Avenue, near West Twenty-eighth Street. The menu still offers a hot meal but packaged in a to-go sack with recyclable dishes, which are the biggest expense at the moment.

In non-pandemic times, the servers and other helpers include fifty or sixty volunteers. Many of these are retirees, and to keep them safe the soup kitchen has told most not to come in. Now all the preparation, serving, cleanup, and security is done by a core group of about fourteen soup-kitchen staff and select volunteers, who wear gloves, wash their hands a lot, and practice "physical distancing." The Reverend Dr. Anna Pearson, the church's rector and head of the soup kitchen, told a visitor, "We don't call it 'social distancing,' because what we offer here is not only food, it's a human connection, even when we must stay physically farther apart."

Early on a recent morning, the sun came down the city's canyons, hitting the white blooms of the pear trees behind the church. Construction workers walked west from the subway stops and kept going, to the under-construction buildings bordering the Hudson River, and soon the cranes started swinging against the blue sky and the elevators on tracks outside the buildings' steel frameworks were going up and down. By eight o'clock, most of the staff had shown up, and some were preparing that day's entrée—baked ham with sweet potato. Seagulls shrieked as they swirled overhead toward the river. First in line, by the church gate, a man in two hooded coats sat with his back against the fence, knees up, reading the *News*. White vans and box trucks pulled to the curb on Ninth Avenue and unloaded crates of broccoli and olive oil. Christopher Molinari, the head chef and culinary manager, said, "When all the restaurants started closing, some sent us their leftover supplies, and we're still improvising menus from what we got. The food-service situation in the city changed so fast, some of the potatoes they sent us were already peeled."

By ten-fifteen, the line stretched to Twenty-eighth Street, around the corner, and down the long block between Ninth Avenue and Eighth. A soup-kitchen employee in a jacket of high-visibility green was walking along the line and urging those waiting to maintain spaces of six feet between one another. They complied, reluctantly, but somehow the line kept re-compressing itself. A strange, almost taxicab-less version of traffic went by on Ninth—delivery trucks, police tow trucks, police cars, home-health-care-worker vans, almost empty buses. Now and then a dog-walker, masked or swathed in a scarf, passed. The dogs, unconcerned, were enjoying the sunny day. At ten-thirty, lunch service started. The guests (as the soup kitchen refers to them) were admitted to the serving station one at a time, like travellers in airport security. Opening their lunch sacks, they began to eat standing on the sidewalk or leaning against the Citi Bike stands, or they crossed to the courtyard of a public building across the street and sat on benches by a statue of a soldier in the First World War.

Michael Ottley, the soup kitchen's C.O.O., stood watching. "We're doing about eight hundred meals a day right now," he said. "We may have to increase that as more people lose their jobs. At any time, we're ready to go to a thousand a day, or higher." Christopher Molinari stepped outside to join him, along with Ginger Pierce, a volunteer, who was the executive chef at Jams, a farm-to-table restaurant on Fifty-eighth Street, until it recently shut down. Reverend Pearson is concerned that in a bad economy donors might get nervous and the soup kitchen's funding might go dry. "But we, the staff, are in it to stay," Molinari said. "This is a great place. As other soup kitchens have closed, Holy Apostles is the last light still on. Without us, a lot of our guests would probably fall by the wayside. We're not going to let that happen." On the avenue, masked and gloved delivery people from upscale grocery stores went pedalling by, towing trailers piled with green-and-yellow plastic bins.

—*Ian Frazier*

DEPT. OF SNAKE OIL

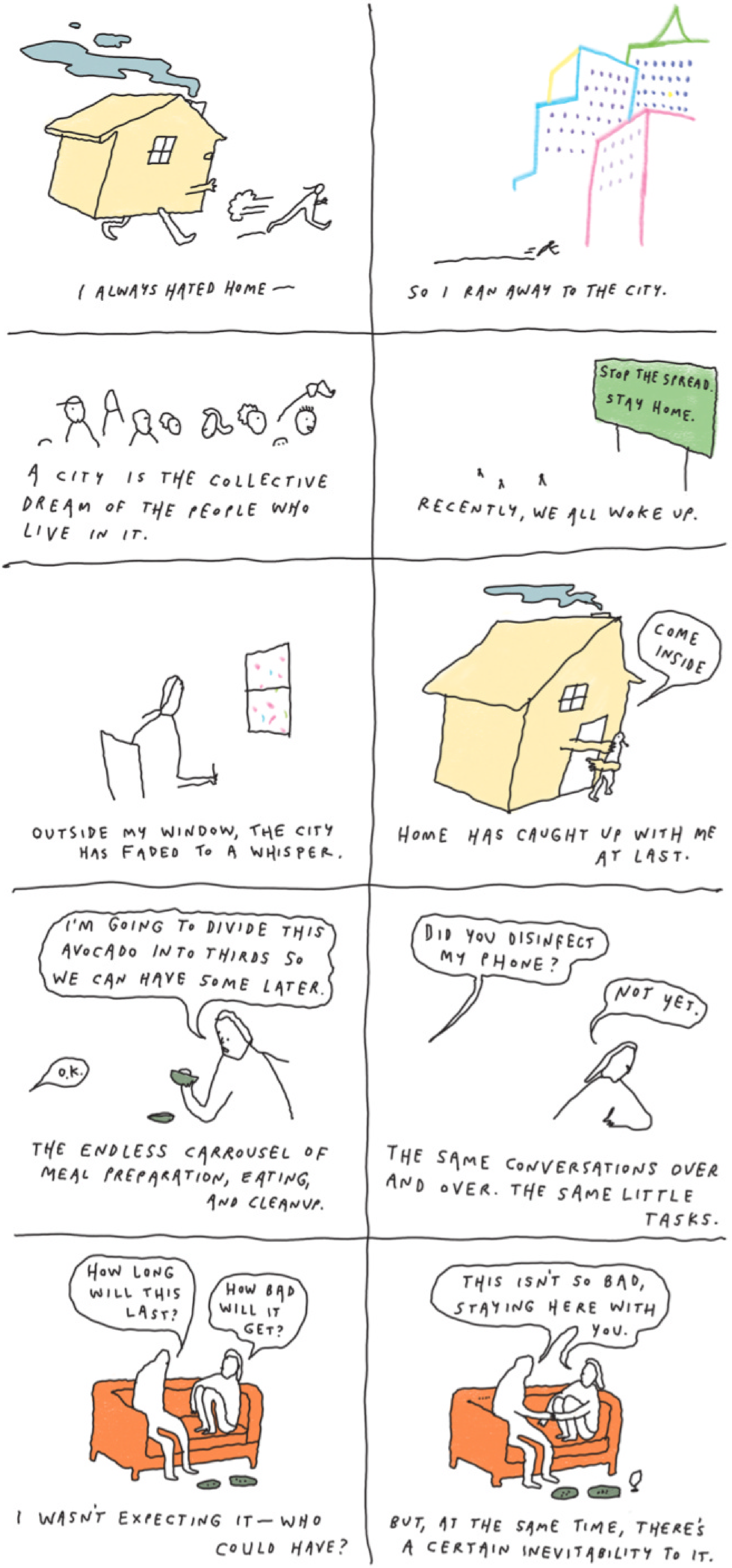
PREPPING FOR PROFIT

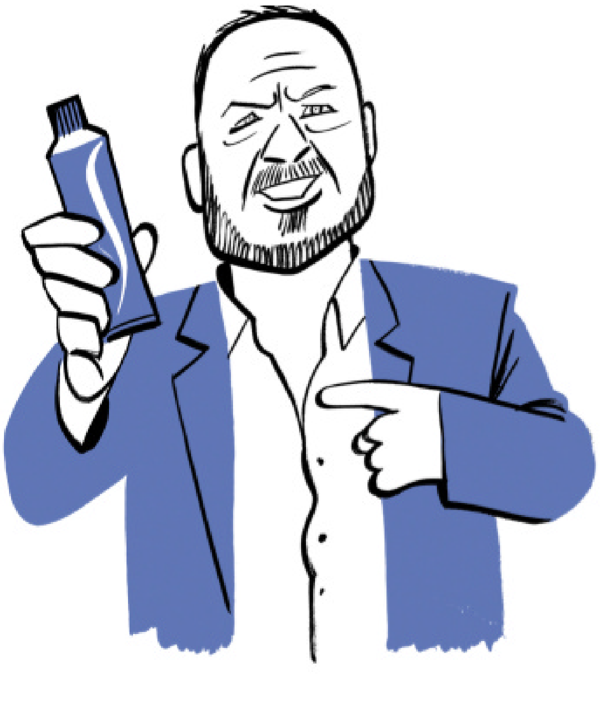
On March 6th, government officials in Austin, Texas, cancelled South by Southwest, because of COVID-19. Although the cancellation would surely save lives, it would also, the festival's organizers said in a statement, take a toll on "hundreds of small businesses." But at least one small business in Austin did not let the crisis go to waste. Infowars is a group of Web sites—a "news" blog, audio and video feeds, an online store—founded by Alex Jones, the nation's most prolific disinformation agent who does not hold elective office. (One of Jones's most prominent fans, Donald Trump, once told him, on air, "Your reputation is amazing.") In a video broadcast the day after South by Southwest was called off, Jones and a guest speculated that the reason was not concern for public safety but rather a "psy-op"—a psychological operation to sow panic and consolidate government power. "Controlling people is a stopgap," Jones said. "But having antivirals, getting your immune system healthy—that is the answer. And, yes, folks, we sell great antivirals."

Jones is best known for his paranoid rants, which have brought him some revenue in the form of online ads, but he makes most of his income as a snake-oil salesman. The Infowars store sells hundreds of products, from "nutraceuticals" to "tactical pens" to "survival food" (dried beans and the like, perfect for stocking a bunker). For the past few weeks, nearly every food item has been sold out. A note on the site read, "Our expanded team is focusing on and will deliver the tens of thousands of orders already in our queue as we work diligently through this national emergency together."

Many of Jones's "health and wellness" products contain colloidal silver: SuperSilver Whitening Toothpaste, SuperSilver Wound Dressing Gel, ABL Nano Silver Gargle. Colloidal silver has only one known effect on the body—if you take too much of it, your skin might turn blue. Still, disaster-prepper types have long

SKETCHPAD BY LIANA FINCK


I ALWAYS HATED HOME—
SO I RAN AWAY TO THE CITY.
A CITY IS THE COLLECTIVE DREAM OF THE PEOPLE WHO LIVE IN IT.
STOP THE SPREAD. STAY HOME.
RECENTLY, WE ALL WOKE UP.
OUTSIDE MY WINDOW, THE CITY HAS FADED TO A WHISPER.
COME INSIDE
HOME HAS CAUGHT UP WITH ME AT LAST.
I'M GOING TO DIVIDE THIS AVOCADO INTO THIRDS SO WE CAN HAVE SOME LATER.
O.K.
THE ENDLESS CARROUSEL OF MEAL PREPARATION, EATING, AND CLEANUP.
DID YOU DISINFECT MY PHONE?
NOT YET.
THE SAME CONVERSATIONS OVER AND OVER. THE SAME LITTLE TASKS.
HOW LONG WILL THIS LAST?
HOW BAD WILL IT GET?
I WASN'T EXPECTING IT—WHO COULD HAVE?
THIS ISN'T SO BAD, STAYING HERE WITH YOU.
BUT, AT THE SAME TIME, THERE'S A CERTAIN INEVITABILITY TO IT.



Alex Jones

touted it as a cure for viral ailments, from H.I.V. to the common cold. “This stuff kills the whole SARS-corona family at point-blank range,” Jones said in a live stream on March 10th. “It kills every virus.” This is not true. On March 6th, the F.D.A. had issued an open letter, warning, “There currently are no vaccines, pills, potions, lotions, lozenges or other prescription or over-the-counter products available to treat or cure coronavirus disease.” Jones was only one of many opportunists advertising bogus coronavirus cures. Jim Bakker, the televangelist, was also selling a colloidal-silver gel; on Facebook, Vivify Holistic Clinic advertised a “very strong boneset tea.”

Although the Infowars studio is in Texas, none of that state’s officials did anything to derail Jones’s sales pitch. But since Infowars content is viewable wherever people have Internet, including New York, this state’s consumer-protection laws apply. “Whenever there’s heightened fear and hysteria, we start to see scammers,” Letitia James, New York’s attorney general, said recently. “We see stores around Brooklyn selling hand sanitizer for eighty dollars a bottle. We see people setting up fake charities—phishing attempts, essentially. We see medical scams—Web sites that have a magic cure. We have a responsibility to take action against anything that is putting New Yorkers in danger.”

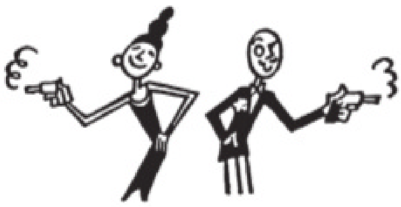
James instructed Lisa Landau, the chief of her office’s health-care bureau, to send Jones a cease-and-desist letter. In a footnote, Landau acknowledged that the Infowars site did include some vague verbiage disclaiming liability, but that its “miniscule font size makes it unlikely that potential customers will read or even see the disclaimer.”

Days later, a new disclaimer appeared, this one in a non-minuscule font: “The products sold on this site are not intended for use in the cure, treatment, prevention, or mitigation of any disease, including the novel coronavirus.” Near the disclaimer, however, was a link to products such as a “Build the Wall, Protect Texas” T-shirt, George Washington socks (“We need to broadcast true Americana everywhere we go to shut down globalist censorship”), and bottles of ABL Nano Silver Gargle (sold out, wait list available). “This is the plan, folks,” Jones said. “They plan on, if they’ve fluoridated you and vaccinated you and stunned you and mesmerized you with the TV and put you in a trance, on killing you.” Meanwhile, “they” were determined “to make sure you don’t learn about the known antivirals that are in the environment.”

“He has added a new disclaimer, but he hasn’t stopped selling the products,” James said. “We are still in contact with his lawyers, and, at a certain point, if they refuse to comply with our order, then enough is enough.” Meaning what? “Meaning we hit them with an array of violations, we issue subpoenas, and we could haul them to court,” she said. “My advice to Mr. Jones and any other scammers out there would be to heed our warnings, because, when we go to court, we have a pretty high success rate.”

—*Andrew Marantz*

OREGON POSTCARD
SHOPPING TRIP



There was no complimentary hand sanitizer for the concerned customers of Gorge Guns, in Hood River, Oregon, on a recent Friday. Erika Bales, the shop’s twenty-nine-year-old owner, wasn’t worried about the virus. “I figure, just let nature take its course,” she said. Her customers were less nonchalant. Bales, who had a neat manicure and a number of tattoos, said that, days earlier, people had begun realizing that “everyone’s buying things and everything’s gonna be gone.” The resulting rush was, for her, unprecedented. She was out of ARs and .308 rifles. A few shotguns remained, and she told shoppers that they could saw them off, to a legal length. “Obama didn’t even bring in these numbers,” Bales said.

At noon, a woman in her sixties came in. She wore plastic gloves and had a scarf wrapped around her face, and she traced a wide arc around the only other non-employee in the store. “I’ve been doing this since the beginning of March,” she said, referring to her protective gear. “I don’t feel sick at all. I’m self-quarantining.” She left her house only for essential activities. This was one. “I’m buying a gun,” she said. “I can’t believe it.”

She went on, “My son was a little upset about it.” (He preferred his bow and arrow.) “I’m old and I live alone, and we don’t know if there’s going to be civil unrest. The world is not the same.” She added, “It didn’t have to be this way.” Unlike many of the shop’s regulars, she was no fan of Trump: “He’s a divider all the way. First he said, ‘Five people have died, big deal.’ Now he’s saying, ‘I always knew it’d be dangerous.’ ” Talk turned to Portland. “It’s a ghost town,” a young woman said. Her name was Rosemary, and she was helping Bales out, since the restaurant where she waited tables had closed.

“I don’t like to go in cities anymore, anyway,” the customer said.

“But these rumors about them putting this country in full lockdown are inaccurate,” Rosemary said. “It’s a scare tactic. It’s not like all of a sudden we’re gonna wake up one day and everyone is sick and the whole world is ending.”

“I don’t know,” the customer said. “The exponential growth is happening.”

“If anything, we’re definitely repopulating, if nobody is at work,” Rosemary said cheerily. “We won’t have a shortage of humans, that’s for sure.”

Bales helped her customer choose a weapon. (“Pick three,” the customer told her.) As Bales rummaged around, the customer said, “I’m going to have a soldier train me. A friend of my son’s.” Bales returned with the first option. “A .22 Mag,” she said. “Holds thirty rounds.”

The customer peered at the gun.

“It’s a Kel-Tec PMR-30,” Bales said.

“I like the color of it,” the customer said. “It’s not black.” She picked it up. “It feels good. And it’s got a safety. I’m going to take this one. You've got ammo for it, right?" Bales nodded and noted a few of the gun's features. "As long as you're accurate, it'll do damage," she said.

"This is just going to be for close range," the customer said. "In my house. If it happens." (Asked what "it" was, she said, "In two months, if the cities are starving, they're gonna come out. And I understand that.") Bales piled boxes of ammunition on the counter. "I'll take them all," the customer said. She ducked outside to get her wallet from the car.

"I think she's a liberal," Bales said, once the door closed. "There's so many coming in. First-time-gun-owner liberals. I've probably seen ten this week. It's so funny, because I hope it just turns them on to liking the Second Amendment. I mean, the Constitution was created for a reason. To protect us."

The customer returned. The bill was nearly seven hundred dollars, including electronic ear protection and sixteen boxes of bullets. She could come back and pick up the gun once her digital background check cleared. The customer asked, "If I don't get approved, what happens?"

"You already got approved," Bales said, glancing at a computer, with some surprise.

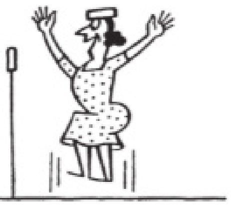
"O.K.! Can I take it?"

"Yeah. Some people go through fast."

The new gun owner asked if there was a shooting range nearby. She asked if she needed a concealed-carry permit. She asked how to carry the gun out. "I can't believe this!" she said, stepping into the world with her brand-new gun.

—*Charles Bethea*

MAKING DO DEPT.
REMOTE



Three days after the Lower East Side venue Caveat closed its doors to the public, Sarah Rose Siskind stood alone on its stage, preparing for an audience she couldn't see. With comedy clubs across the city shutting down, Caveat's co-founder Ben Lillie became one of the first to attempt streaming shows online. Siskind, the guinea pig for this approach, was making some last-minute changes to her act. "Caveat has a license to play copyrighted music in the theatre, but not on a live stream—and my show is built almost entirely around copyrighted music," she explained. She gave a wry smile and brandished a ukulele. "I pretty much know three songs, and they're all sad, so . . ."

" 'Losing My Religion' sounds *great* on a ukulele," Lillie said. He headed toward the tech booth at the back of the theatre, passing shelves full of skulls, ammonites, and planetary models. Caveat, which opened in 2017, styles itself as a hub for "smart entertainment," and the fact that many of its performers are researchers or science educators by day proved useful in drawing up an action plan for the pandemic. One show, "Doctors Without Boundaries," is m.c.'d by E.R. physicians who now find themselves on the front lines of New York's coronavirus response. When its co-host Andres Mallipudi began to show symptoms of COVID-19 but remained determined to participate remotely, the club realized the broadcast could be a model for all events going forward. Lillie, who lives two doors down, can come into the space as needed, but he said he wouldn't ask a performer to do the same, especially if doing so required taking public transportation.

Siskind also lives nearby. She's done standup at a number of local clubs, but Caveat was the only one, by then, that had moved online—perhaps in part because of the challenges posed by remote comedy. "Steve Colbert's monologue was the creepiest fucking thing I've ever seen," she said, laughing as she recalled the eerie silence of a studio without an audience. "*So* dystopian! So, when my audience just can't contain their laughter . . ." She used her phone to cue a tinny laugh track.

"It, uh, it clearly sounds electronic," Lillie called from the tech booth.

"Oh, that's the whole point," Siskind replied brightly.

Siskind's good cheer is representative. "Everyone's pretty game," Lillie said. "We're an experimental space, so this is what our performers do. We have this little three-camera setup. We play with new formats and new things, and live streaming is something we've wanted to do—we've just never had a reason to pull the trigger. So, here we go!"

Onstage, Siskind chatted with one of the academics set to appear on her show, whom she had called for a remote sound check. "Last night I watched 'Contagion,'" she confessed. "It's the worst thing to watch, but everything else is not interesting to me. I watched 'The Omega Man' before that. I'm just making my way through the list." She sighed and ducked behind the abandoned bar, emerging with a beer. "I was hoping that this show would be something familiar, you know? Something kind of off topic from corona." But, with half an hour to go, technical difficulties still loomed: she noted the sputtering projector and made a diplomatic reference to a certain demographic whose members were struggling to navigate Zoom.

"The boomers?" the academic asked.

"I was trying to say boomers, but I couldn't bring myself to say it," Siskind replied. "I feel bad making fun of them, given the coronavirus. They're having a tough time!"

She continued to call remote guests, finalizing her lineup. After some troubleshooting, Lillie reappeared.

"There is no way we're going to get through this without insane levels of mistakes," Siskind told him, smiling.

"It's endearingly we're-all-making-shit-up-because-of-coronavirus!" he said. They tapped elbows.

Minutes before airtime, the lights dimmed. "This way, I can pretend there *are* people in the audience—they just hate me, and they're being super quiet," Siskind said. "So, much better!" She cradled her ukulele, plucked the opening chords of Lady Gaga's "Angel Down," and started to sing.

—*Alex Barasch*

CORONAVIRUS CHRONICLES

The One and the Many

We've counted the viral spread across peoples; we need to count it within people.

BY SIDDHARTHA MUKHERJEE

In the third week of February, as the COVID-19 epidemic was still flaring in China, I arrived in Kolkata, India. I woke up to a sweltering morning—the black kites outside my hotel room were circling upward, lifted by the warming currents of air—and I went to visit a shrine to the goddess Shitala. Her name means "the cool one"; as the myth has it, she arose from the cold ashes of a sacrificial fire. The heat that she is supposed to diffuse is not just the fury of summer that hits the city in mid-June but also the inner heat of inflammation. She is meant to protect children from smallpox, heal the pain of those who contract it, and dampen the fury of a pox epidemic.

The shrine was a small structure within a temple a few blocks from Kolkata Medical College. Inside, there was a figurine of the goddess, sitting on a donkey and carrying her jar of cooling liquid—the way she has been depicted for a millennium. The temple was two hundred and fifty years old, the attendant informed me. That would date it to around the time when accounts first appeared of a mysterious sect of Brahmans wandering up and down the Gangetic plain to popularize the practice of *tika*, an early effort at inoculation. This involved taking matter from a smallpox patient's pustule—a snake pit of live virus—and applying it to the pricked skin of an uninfected person, then covering the spot with a linen rag.

The Indian practitioners of *tika* had likely learned it from Arabic physicians, who had learned it from the Chinese. As early as 1100, medical healers in China had realized that those who survived smallpox did not catch the illness again (survivors of the disease were enlisted to take care of new victims), and inferred that the exposure of the body to an illness protected it from future instances of that illness. Chinese doctors would grind smallpox scabs into a powder and insufflate it into a child's nostril with a long silver pipe.

Vaccination with live virus was a tightrope walk: if the amount of viral inoculum in the powder was too great, the child would succumb to a full-fledged version of the disease—a disaster that occurred perhaps one in a hundred times. If all went well, the child would have a mild experience of the disease, and be immunized for life. By the seventeen-hundreds, the practice had spread throughout the Arab world. In the seventeen-sixties, women in Sudan practiced *tishteree el jidderee* ("buying the pox"): one mother haggling with another over how many of a sick child's ripe pustules she would buy for her own son or daughter. It was an exquisitely measured art: the most astute traditional healers recognized the lesions that were likely to yield just enough viral material, but not too much. The European name for the disease, variola, comes from the Latin for "spotted" or "pimpled." The process of immunizing against the pox was called "variolation."

Lady Mary Wortley Montagu, the wife of the British Ambassador to Constantinople, had herself been stricken by the disease, in 1715, leaving her perfect skin pitted with scars. Later, in the Turkish countryside, she witnessed the practice of variolation, and wrote to her friends in wonder, describing the work of one specialist: "The old woman comes with a nut-shell full of the matter of the best sort of small-pox, and asks what vein you please to have opened," whereupon she "puts into the vein as much matter as can lie upon the head of her needle." Patients retired to bed for a

Measurement will help identify factors affecting the severity of COVID-19 cases.

ILLUSTRATION BY ALEXANDER GLANDIEN

couple of days with a fever, and, Lady Montagu noted, emerged remarkably unscathed. "They have very rarely above twenty or thirty in their faces, which never mark; and in eight days' time they are as well as before their illness." She reported that thousands safely underwent the operation every year, and that the disease had largely been contained in the region. "You may believe I am well satisfied of the safety of this experiment," she added, "since I intend to try it on my dear little son." Her son never got the pox.

In the centuries since Lady Montagu marvelled at the efficacy of inoculation, we've made unimaginable discoveries in the biology and epidemiology of infectious disease, and yet the COVID-19 pandemic poses no shortage of puzzles. Why did it spread like wildfire in Italy, thousands of miles from its initial epicenter, in Wuhan, while India appears so far to have largely been spared? What animal species transmitted the original infection to humans?

But three questions deserve particular attention, because their answers could change the way we isolate, treat, and manage patients. First, what can we learn about the "dose-response curve" for the initial infection—that is, can we quantify the increase in the risk of infection as people are exposed to higher doses of the virus? Second, is there a relationship between that initial "dose" of virus and the severity of the disease—that is, does more exposure result in graver illness? And, third, are there quantitative measures of how the virus behaves in infected patients (e.g., the peak of your body's viral load, the patterns of its rise and fall) that predict the severity of their illness and how infectious they are to others? So far, in the early phases of the COVID-19 pandemic, we have been measuring the spread of the virus *across* people. As the pace of the pandemic escalates, we also need to start measuring the virus *within* people.

Most epidemiologists, given the paucity of data, have been forced to model the spread of the new coronavirus as if it were a binary phenomenon: individuals are either exposed or unexposed, infected or uninfected, symptomatic patients or asymptomatic carriers. Recently, the Washington *Post* published a particularly striking online simulation, in which people in a city were depicted as dots moving freely in space—uninfected ones in gray, infected ones in red (then shifting to pink, as immunity was acquired). Each time a red dot touched a gray dot, the infection was transmitted. With no intervention, the whole field of dots steadily turned from gray to red. Social distancing and isolation kept the dots from knocking into one another, and slowed the spread of red across the screen.

This was a bird's-eye view of a virus radiating through a population, seen as an "on-off" phenomenon. The doctor and medical researcher in me—as a graduate student, I was trained in viral immunology—wanted to know what was going on *within* the dots. How much virus was in *that* red dot? How fast was it replicating in *this* dot? How was the exposure—the "touch time"—related to the chance of transmission? How long did a red dot remain red—that is, how did an individual's infectiousness change over time? And what was the severity of disease in each case?

What we've learned about other viruses—including the ones that cause AIDS, SARS, and smallpox—suggests a more complex view of the disease, its rate of progression, and strategies for containment. In the nineteen-nineties, as researchers learned to measure how much H.I.V. was in a patient's blood, a distinct pattern emerged. After an infection, the virus count in the blood would rise to a zenith, known as "peak viremia," and patients with the highest peak viremia typically became sicker sooner; they were least able to resist the virus. Even more predictive than the peak viral load was the so-called set point—the level at which someone's virus count settled after its initial peak. It represented a dynamic equilibrium that was reached between the virus and its human host. People with a high set point tended to progress more rapidly to AIDS; people with a low set point frequently proved to be "slow progressors." The viral load—a continuum, not a binary value—helped predict the nature, course, and transmissibility of the disease. To be sure, every virus has its own personality, and H.I.V. has traits that make viral load especially revealing: it causes a chronic infection, and one that specifically targets cells of the immune system. Yet similar patterns have been observed with other viruses.

And, immunologically, that's not surprising. If your system is able to combat viral replication with some efficiency—owing to your age, your genetics, and other indices of immune competence—you'll have a lower set point. Could a lower initial exposure, as with children treated with *tika*, also lead to a lower set point? Faced with a smaller challenge, the immune system could have a greater chance of controlling the pathogen. In contrast, if you're inundated with multiple high-dose exposures, the swiftly replicating invader could gain ground that the immune system might be hard-pressed to reconquer.

An ingenious study on the relationship between the intensity of viral exposure and infectivity in human beings comes from a team at the Fred Hutchinson Cancer Research Center and the University of Washington, in Seattle. In 2018, an epidemiologist and statistician named Bryan Mayer joined a group of physicians and biologists who were researching a problem that seemed, on its face, almost impossible to tackle. Mayer, who is in his mid-thirties, is soft-spoken and precise: he uses words carefully, and speaks in long, slow sentences. "Even as a graduate student, I was interested in the idea of a *dose* of a virus or a pathogen," he told me. "But the problem is that the initial dose is often impossible to capture, because you only know a person is infected after he or she has *been* infected." Most infectious diseases can only be viewed in a rear-view mirror: by the time a patient becomes a patient, that critical moment of transmission has already passed.

But the researchers found an unusual resource: a cohort of new mothers and their children in Kampala, Uganda. A few years earlier, a pediatrician named Soren Gantt and a team of doctors examined these women, and asked them to provide oral swabs for a year. Then they measured how much the women shed a virus called HHV-6, which is usually spread through oral secretions to an infant after birth, and which causes fever and a red whole-body rash. It was now possible to investigate how the amount of virus-shedding—the "dose" of exposure—affected the likelihood of a newborn infant becoming infected. Gantt, Mayer, and their colleagues had devised a way to eavesdrop on the dynamics of the transmission of a human viral infection from the very start. "Our data confirmed that there's a dose-response relationship in viral transmissions for HHV-6," Mayer told me. "The more virus you shed, the more likely you are to infect others." He'd managed to turn around the rearview mirror of epidemiology.

There's another aspect of transmission and disease, however: the host immune response. Viral attack and the immune system's defense are two opposing forces, constantly at odds. The Russian immunologist Ilya Metchnikoff, working in the early nineteen-hundreds, described the phenomenon as "the struggle"—or *Kampf*, in German editions of his work. Metchnikoff imagined an ongoing battle between microbe and immunity. The *Kampf* was a matter of ground gained or lost. What was the total "force" of the microbial presence? What host factors—genetics, prior exposure, baseline immune competence—were limiting the microbial invasion? And then: was the initial equilibrium tipped toward the virus, or toward the host?

That raises the second question—does a larger viral "dose" result in more severe disease? It's impossible to erase from one's memory the image of Li Wenliang, the thirty-three-year-old Chinese ophthalmologist who sounded the alarm on the first COVID-19 cases, in his final illness; a photograph shows him crimson-faced, sweating, and struggling to breathe in a face mask, shortly before his death. Then there's the unexpected death of Xia Sisi, a twenty-nine-year-old doctor from Union Jiangbei Hospital of Wuhan, who had a two-year-old child and, the *Times* reported, loved Sichuan hot pot. Another Chinese health-care worker, a twenty-nine-year-old nurse in Wuhan, fell so critically ill that she started hallucinating; later, she would describe herself as "walking on the edge of death."

Could the striking severity of their disease—twenty- and thirty-year-olds with COVID-19 generally experience a self-limited, flu-like illness—be correlated with the amount of virus to which they were initially exposed? At least two E.R. doctors in the United States, both on the front lines of the pandemic, have also fallen critically ill; one of them, in Washington State, is only in his forties. To go by available data from Wuhan and Italy, health-care workers don't necessarily have a higher fatality rate, but do they suffer, disproportionately, from the most severe forms of the disease? "We know the high mortality in older people," Peter Hotez, an infectious-disease specialist and vaccine scientist at Baylor College of Medicine, told CNN. "But, for reasons that we don't understand, front-line health-care workers are at great risk for serious illness despite their younger age."

Some suggestive research has been done with other viruses. In animal models of influenza, it's possible to precisely quantify exposure intensity, and mice who were given higher doses of certain influenza viruses developed a more severe form of the disease. Yet the degree of correlation between dose and disease severity varied widely from one strain of the flu to the next. (Curiously, in one study a higher initial load of respiratory syncytial virus, which can cause pneumonia, especially in young children, correlated *negatively* with severe disease—although another study suggests that the correlation is positive with toddlers, the most affected patient population.)

What sparse evidence we have about coronaviruses suggests that they may follow the pattern seen in influenza. In a 2004 study of the coronavirus that causes SARS, a cousin of the one that causes COVID-19, a team from Hong Kong found that a higher initial load of virus—measured in the nasopharynx, the cavity in the deep part of your throat above your palate—was correlated with a more severe respiratory illness. Nearly all the SARS patients who came in initially with a low or undetectable level of virus in the nasopharynx were found at a two-month follow-up to be still alive. Those with the highest level had a twenty- to forty-per-cent mortality rate. This pattern held true regardless of a patient's age, underlying conditions, and the like. Research into another acute viral illness, Crimean-Congo hemorrhagic fever, reached a similar conclusion: the more virus you had at the start, the more likely you were to die.

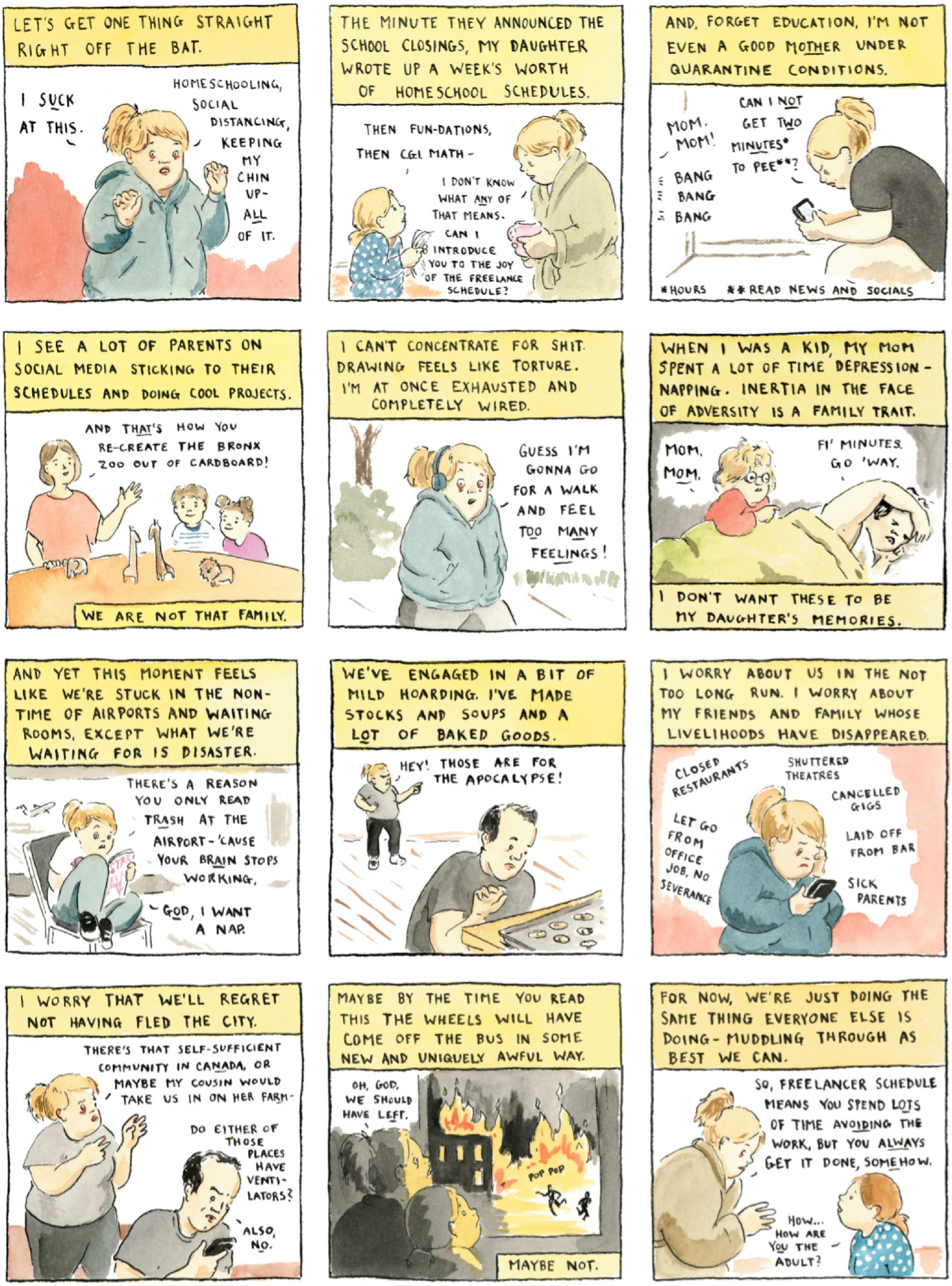
Perhaps the strongest association between the intensity of exposure and the intensity of subsequent disease is seen in measles research. "I want to emphasize that measles and COVID-19 are different diseases caused by very different viruses with different behaviors," Rik de Swart, a virologist at Erasmus University, in Rotterdam, cautioned when we spoke, "but in measles there are several clear indications that the severity of illness relates to the dose of exposure. And it makes immunological sense, because the interaction between the virus and the immune system is a race in time. It's a race between the virus finding enough target cells to replicate and the antiviral response aiming to eliminate the virus. If you give the virus a head start with a large dose, you get higher viremia, more dissemination, higher infection, and worse disease."

He described a study from 1994 in which researchers gave monkeys different doses of the measles virus and found that higher infection doses were associated with earlier peaks in viremia. In human beings, de Swart added, the best evidence comes from studies in sub-Saharan Africa. "If you acquire measles through household contacts, where the density and dose of exposure is the highest—you might be sharing a bed with an infected child—then you typically have a higher risk of developing more severe illness," he said. "If a child contracts the disease through playground or casual contact, the disease is usually less severe."

I discussed this aspect of infection with the Harvard virologist and immunologist Dan Barouch, whose lab is among those that are working toward a vaccine against SARS-CoV-2, the virus that causes COVID-19. He told me that ongoing studies with macaques are investigating the relationship between the initial dose of the SARS-CoV-2 viral inoculum and the amount of virus in lung secretions at a later time. He believes that there may be a correlation. "If we extended this logic to humans, we would expect a similar relationship," he said. "And, logically, the larger amount of virus should trigger more severe disease by prompting a brisker inflammatory response. But that is still speculative. The relationship between initial viral dose and severity remains to be seen."

To answer the third question—whether we can track a COVID-19 patient's viral

COMIC STRIP BY EMILY FLAKE


LET'S GET ONE THING STRAIGHT RIGHT OFF THE BAT.
I SUCK AT THIS.
HOMESCHOOLING, SOCIAL DISTANCING, KEEPING MY CHIN UP– ALL OF IT.
THE MINUTE THEY ANNOUNCED THE SCHOOL CLOSINGS, MY DAUGHTER WROTE UP A WEEK'S WORTH OF HOMESCHOOL SCHEDULES.
THEN FUN-DATIONS, THEN C.G.I. MATH –
I DON'T KNOW WHAT ANY OF THAT MEANS. CAN I INTRODUCE YOU TO THE JOY OF THE FREELANCE SCHEDULE?
AND, FORGET EDUCATION, I'M NOT EVEN A GOOD MOTHER UNDER QUARANTINE CONDITIONS.
MOM. MOM!
BANG BANG BANG
CAN I NOT GET TWO MINUTES* TO PEE**?
*HOURS **READ NEWS AND SOCIALS
I SEE A LOT OF PARENTS ON SOCIAL MEDIA STICKING TO THEIR SCHEDULES AND DOING COOL PROJECTS.
AND THAT'S HOW YOU RE-CREATE THE BRONX ZOO OUT OF CARDBOARD!
WE ARE NOT THAT FAMILY.
I CAN'T CONCENTRATE FOR SHIT. DRAWING FEELS LIKE TORTURE. I'M AT ONCE EXHAUSTED AND COMPLETELY WIRED.
GUESS I'M GONNA GO FOR A WALK AND FEEL TOO MANY FEELINGS!
WHEN I WAS A KID, MY MOM SPENT A LOT OF TIME DEPRESSION-NAPPING. INERTIA IN THE FACE OF ADVERSITY IS A FAMILY TRAIT.
MOM. MOM.
FI' MINUTES. GO 'WAY.
I DON'T WANT THESE TO BE MY DAUGHTER'S MEMORIES.
AND YET THIS MOMENT FEELS LIKE WE'RE STUCK IN THE NON-TIME OF AIRPORTS AND WAITING ROOMS, EXCEPT WHAT WE'RE WAITING FOR IS DISASTER.
THERE'S A REASON YOU ONLY READ TRASH AT THE AIRPORT – 'CAUSE YOUR BRAIN STOPS WORKING.
GOD, I WANT A NAP.
STAR
WE'VE ENGAGED IN A BIT OF MILD HOARDING. I'VE MADE STOCKS AND SOUPS AND A LOT OF BAKED GOODS.
HEY! THOSE ARE FOR THE APOCALYPSE!
I WORRY ABOUT US IN THE NOT TOO LONG RUN. I WORRY ABOUT MY FRIENDS AND FAMILY WHOSE LIVELIHOODS HAVE DISAPPEARED.
CLOSED RESTAURANTS
SHUTTERED THEATRES
CANCELLED GIGS
LET GO FROM OFFICE JOB, NO SEVERANCE
LAID OFF FROM BAR
SICK PARENTS
I WORRY THAT WE'LL REGRET NOT HAVING FLED THE CITY.
THERE'S THAT SELF-SUFFICIENT COMMUNITY IN CANADA, OR MAYBE MY COUSIN WOULD TAKE US IN ON HER FARM –
DO EITHER OF THOSE PLACES HAVE VENTILATORS?
ALSO, NO.
MAYBE BY THE TIME YOU READ THIS THE WHEELS WILL HAVE COME OFF THE BUS IN SOME NEW AND UNIQUELY AWFUL WAY.
OH, GOD, WE SHOULD HAVE LEFT.
POP POP
MAYBE NOT.
FOR NOW, WE'RE JUST DOING THE SAME THING EVERYONE ELSE IS DOING – MUDDLING THROUGH AS BEST WE CAN.
SO, FREELANCER SCHEDULE MEANS YOU SPEND LOTS OF TIME AVOIDING THE WORK, BUT YOU ALWAYS GET IT DONE, SOMEHOW.
HOW... HOW ARE YOU THE ADULT?

load in a way that helps us predict the course of the disease—we'll need more quantitative research into SARS-CoV-2 counts within patients. One unpublished German study has measured viral loads on oral swabs taken of both symptomatic and asymptomatic individuals. Initially, it was reported that patients who experienced no symptoms had slightly higher loads than those who fell ill. The results were curious. But at the time only seven patients had been studied. Sandra Ciesek, the director of the Institute of Medical Virology, in Frankfurt, who was running the study, told me that no significant differences between the two groups emerged as a larger patient population began to be sampled. "In swabs, we don't know of a correlation," she informed me. The problem with measuring viral loads in a swab is that it is "affected by preanalytic factors, such as the way in which the swab is taken," she added. Oral swabs are notoriously affected by small variations in how they're done. "But a correlation with severe disease may well be true for the viral load in blood." Joshua Schiffer, a clinical virologist at the Fred Hutchinson Center, and a co-author of the HHV-6 study, reports that more stringent nasal-swabbing methods for a range of respiratory viruses have yielded consistent, reliable viral-load counts, and that these loads have generally tracked well with disease symptoms and progression. In a paper published online by *The Lancet Infectious Diseases* in March, researchers at the University of Hong Kong and Nanchang University reported that viral loads in nasopharyngeal swabs from a group of patients with severe COVID-19 were sixty times higher, on average, than the loads among patients with a mild form of the disease.

As the virus continues to cyclone across the world, we will begin to find quantitative answers to these questions of how exposure intensity and subsequent viral loads relate to the clinical course of COVID-19. We will supplement the bird's-eye view with the worm's-eye view. How will these insights change the way we manage patients, hospitals, and populations?

Start with the relationship between exposure intensity and infection. Think, for a moment, of how we monitor those who work with radiation. Using radiation dosimetry, we quantify someone's total exposure, and we set limits on it. We already know how critical it is for doctors and nurses to limit exposure to the coronavirus by using protective equipment (masks, gloves, gowns). But for health-care workers on the front lines of the COVID-19 pandemic, especially in places where protective equipment is scarce, we might also keep track of total exposure, and put in place viral-dosimetry controls, so that one individual can avoid repeated interactions with some set of highly contagious patients.

Establishing a relationship between dose and disease severity could, in turn, affect patient care. If we could identify pre-symptomatic patients who were likely exposed to the highest doses of viruses—someone cohabitating or socializing with multiple sick family members (as with the close-knit Fusco family of Freehold, New Jersey, which has had four deaths), or a nurse exposed to a set of patients shedding large amounts of the virus—we might predict a more severe experience of the disease, and give them priority when it came to limited medical resources, so that they could be treated faster, earlier, or more intensively.

And, finally, the care of COVID-19 patients could change if we began to track virus counts. These parameters could be gauged using fairly inexpensive and easily available laboratory methods. Imagine a two-step process: first, identifying infected patients, and then quantifying viral loads in nasal or respiratory secretions, particularly in patients who are likely to require the highest level of treatment. Correlating virus counts and therapeutic measures with outcomes might result in different strategies of care or isolation.

The value of a quantitative approach applies to clinical studies as well. Clinical drug trials are typically more informative when run on subjects who aren't yet critical; once the subjects have reached that stage, any therapy might be too little, too late. And if the disease course in such patients is followed using viral-load metrics, rather than by tracking symptoms alone, the effect of a drug in different trials can be compared more easily and accurately.

We will also want to be able to identify people who have recovered from infection, have become immune to SARS-CoV-2, and are no longer contagious. Such people must meet two criteria: they must have a measured absence of viral shedding, and they must have signs of persistent immunity in their blood (something readily determined by an antibody test). As the Chinese discovered with smallpox in the twelfth century, such individuals—especially those who are health-care workers—are of particular value to medicine: barring any decay in immunity, they can generally tend to the sickest patients without getting sick themselves.

My clinical practice is in oncology. Measurement and enumeration are the mainstays of medicine for people in my field: the size of a tumor, the number of metastases, the exact shrinkage of a malignant mass after chemotherapy. We talk about "risk stratification" (categorizing patients according to health status) and the "stratification of response" (categorizing patients according to their response to treatment). I am able to spend half an hour or more with every patient to describe risk, explain how a remission is measured, and carefully devise a clinical plan.

A pandemic, by contrast, goes hand in hand with panic. Chaos reigns. Italian doctors are hanging I.V. drips on makeshift poles for patients lying on makeshift cots in makeshift wards. Measurement—viral-load testing—can seem like an improbable indulgence under such circumstances. But this crisis will require that we stratify and assess risk, and deploy dwindling resources in the most effective manner.

The word "epidemiology" is derived from "epi" and "demos"—"above the people." It is the science of aggregation, the science of the many. Yet it works most effectively when it moves in step with medicine, the science of the one. On the morning I visited the Shitala shrine in Kolkata, the goddess of bygone population-decimating epidemics was also serving as the personal goddess of a mother who had brought a child with a weeklong fever. To win the *Kampf* against COVID-19, it's essential to trace the course of the virus as it moves through populations. But it's equally essential to measure its course within a single patient. The one becomes the many. Count both; both count. ♦

SHOUTS & MURMURS

Greetings from the
QUARANTINE

LUCI GUTIÉRREZ

Fear of Missing Out

BY CORA FRAZIER

If I don't go into the living room, I will miss my partner talking on the phone to surgeons who are cancelling elective surgeries. And if I *do* go into the living room I'll miss what's happening in this room—namely, waiting for a Zoom link to load.

And if I go to the kettle-boiling event in the kitchen I'll miss the squirrel hopping around on the fire escape, and you can never predict when that will happen again. But if I watch the squirrel I'll miss our social plan for the foreseeable future: sitting on the couch wearing noise-cancelling headphones.

If I stand at my windowsill anxiety-stroking the leaves of my plant, I'll miss whatever is going on in my closet, and I've never been there before and I've been meaning to go.

And while I'm here, repositioning my desk against a different wall to create a sense that I have left the room in the past ten hours, I'm missing being inside all my friends' homes while they reposition their desks against another wall to create a sense that they've left the room in the past ten hours, and I didn't go to that yesterday, either.

I've already committed to squeezing inside our storage space for the next half hour to recount the number of toilet-paper rolls. The only thing is, then I'll miss crouching in the living room and picking my own hairs off the carpet in order to create a sense of control over the uncontrollable. It can be so hard to judge what really is better for your health: a more intense workout of jumping up and down in place in front of your stove or a more relaxed workout of floor yoga poses beneath your bed. Either way, I'll know that someone, somewhere, is having a Google Hangout without me.

If I sit on the edge of the tub telling myself to be brave, I'll miss standing at the window, looking down at the street, and thinking that one good thing about not having a dog to walk is that I don't have to touch as many doorknobs. And who knows when I'll get another opportunity to take a selfie with that dog from sixty yards away?

If I maintain my public image by choosing a fly outfit, walking down the street with confidence, and looking into the dark windows of shuttered restaurants, then I'll miss ordering the "It" cocktail to go at my favorite bar in a Styrofoam cup.

And if I go to the grocery store to wander the aisles of canned food which have nothing left but artichokes in a jar and dented cans of pearl onions I'll miss Skyping with my friend while we say over and over, "This is so crazy," and maybe this is the one time someone really cool shows up to that.

I would sit at the dining-room table with a thermometer in my mouth for the second time today, but I'd hate to miss listening to my partner negotiate airline refunds, especially since it's spring break.

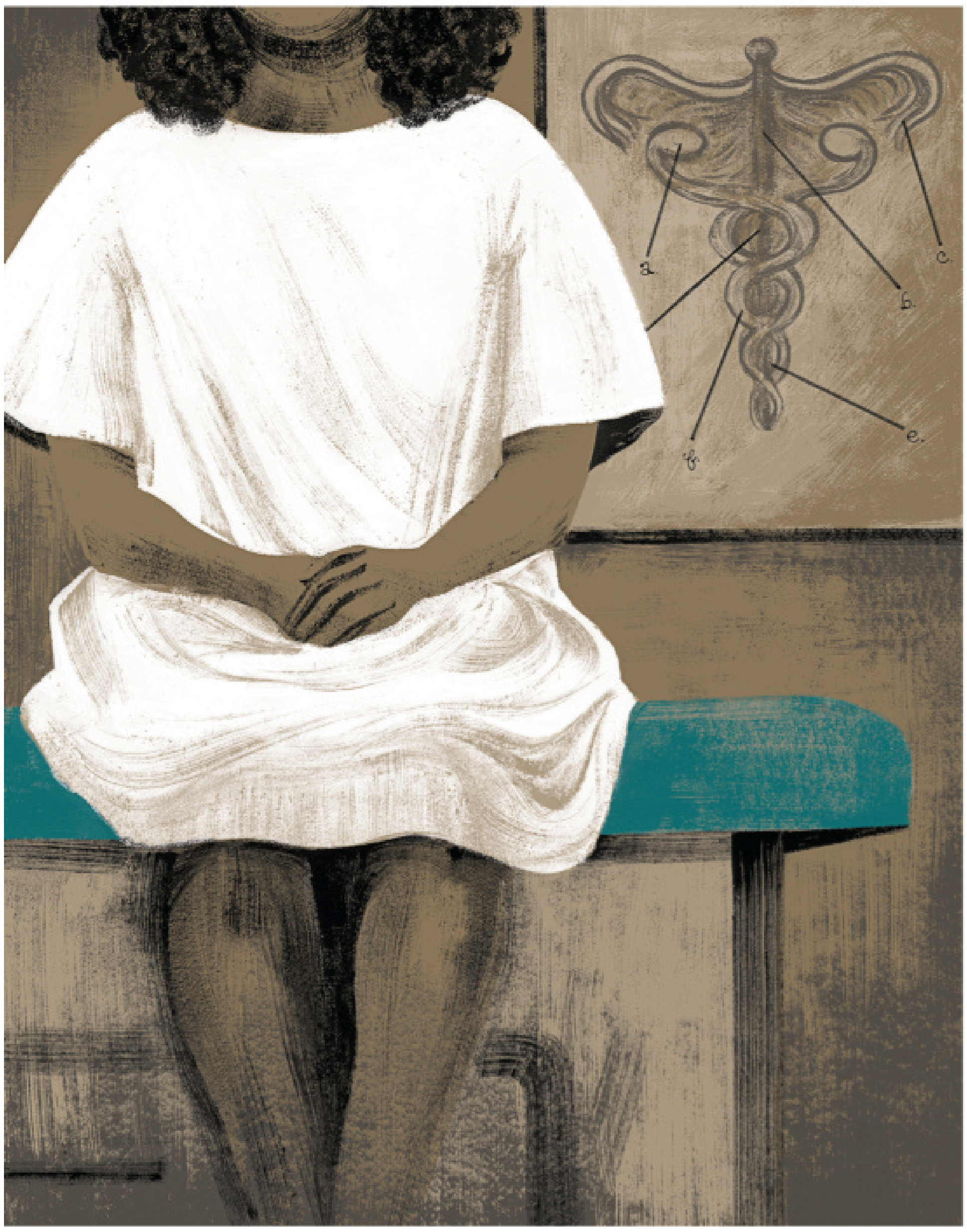
And if I call my primary-care physician to ask if my cough is coronavirus-related I'll miss the tri-daily bannister sanitation, and I already responded to that event on Facebook as "interested." And if I go to my primary-care physician's office in Manhattan for a test I'll miss watching another hour of a dystopian show that used to scare me when I could still leave the house without wearing latex gloves.

And if I test positive for the virus and go to a hospital I'll miss lying on a hospital bed in a gymnasium. And if I go to a gymnasium I'll miss the while-supplies-last pop-up shop of disinfecting wipes. And if I recover from the coronavirus then I'll miss being injected with the new vaccine.

But if I *don't* get the new vaccine then I'll get the coronavirus. So it's really hard to judge what the best move is.

Honestly, sometimes I just want to stay home and do nothing at all. ♦

ANNALS OF MEDICINE



Cervical cancer disproportionately affects poor women and women of color.

A Deadly Principle

Alabama refuses to expand Medicaid. Now a preventable cancer is on the rise.

BY EYAL PRESS

One winter day in 2016, Tonya Carter felt a sharp pain in her lower back. In the months that followed, the pain grew more frequent and more diffuse, running down the back of her legs when she was sitting, and flaring up when she lay on the sofa in her living room at night. A devout Christian, Carter prayed that God, whom she referred to as "my ultimate physician," would make the pain go away. It didn't go away. She would have gone to see an actual doctor, she told me recently, but it was beyond her financial means.

Carter worked for Comfort Keepers, a company that provides in-home care for seniors. She liked the job, which involved tending to elderly people who required assistance with personal care and such chores as cooking and cleaning. Carter was a dedicated caretaker, sometimes fixing homemade corn bread and turnip greens for her clients. Her salary was low: eight dollars an hour, without benefits. "That's good for around here," said Carter, who lives in Anniston, a small city in northeastern Alabama with a troubled racial history—in 1961, a Freedom Riders bus was firebombed by a local mob—and an uncertain future. In 1999, a nearby U.S. Army base, Fort McClellan, closed down. Since then, Anniston's population has shrunk, and the poverty rate has risen to nearly thirty per cent. Carter sometimes considered moving elsewhere, but her options were limited. At the time she started working at Comfort Keepers, she was divorced and had four children, three of whom still lived at home. Between rent, utilities, and providing for her family's needs, her income was stretched far too thin to pay for health insurance.

In dozens of states, Carter would have qualified for Medicaid, particularly after the passage of the 2010 Affordable Care Act, which extended Medicaid benefits to all households earning up to a hundred and thirty-eight per cent of the poverty line. But in 2014, when Medicaid expansion took hold, Alabama and twenty-four other states, almost all of which had Republican-led legislatures, opted out; that year, Robert Bentley, then the state's governor, argued that it would burden taxpayers and foster "dependency on government." In Alabama, as in much of the South, the Affordable Care Act was derisively called Obamacare, and was attacked as a wasteful government program that showered benefits on undeserving recipients. In 2016, Donald Trump tweeted that Hillary Clinton "wants Obamacare for illegal immigrants." More recently, Jeff Sessions, who is running for his former Alabama Senate seat, aired a campaign ad accusing Democrats of plotting to provide "free health care for illegal immigrants." In fact, undocumented immigrants are ineligible for Medicaid, but it's not hard to imagine how such a claim might arouse indignation among poor voters in Alabama, where the income requirements for Medicaid are more stringent than in any state except Texas. In a family of four, a parent qualifies for benefits only if the household income is less than three hundred and ninety-three dollars a month—roughly eighteen per cent of the poverty line.

Carter had gone years without a routine checkup; she hadn't seen a gynecologist in more than a decade. As the months passed, her mind raced with theories about what might be wrong. Maybe she had kidney stones, or endometriosis. The pain spread through her abdomen and her pelvic area, and she began to bleed after intercourse. "It

ILLUSTRATION BY CHLOE CUSHMAN

was just out of nowhere, and it was continuous," she said.

At work, Carter ducked into the bathroom whenever the pain grew unbearable, hoping that her absence wouldn't be noticed. After one such episode, she emerged to discover that her client, an elderly man, had walked outside and fallen. Although the man was not seriously injured, she was mortified by the incident.

By the summer, Carter was suffering so acutely that she finally sought medical care. The cause of her distress, she learned, was cervical cancer. Recently, a nurse informed her that the disease had advanced to Stage IV B: it had spread to her ovaries and other internal organs, and was considered terminal. Under Alabama law, now that she was sick, she qualified for Medicaid.

A century ago, cervical cancer was the deadliest form of cancer among women in the United States. Since then, the prevalence and the lethality of the disease have declined dramatically. The widespread use of Pap smears has allowed doctors to detect abnormalities earlier. And in 2006 the F.D.A. approved the use of the human papillomavirus, or H.P.V., vaccine, which can protect women from the most dangerous strains of the virus. Cervical cancer typically results from H.P.V. infections that are transmitted sexually.

Cervical cancer is now viewed by most physicians as preventable, and in more affluent parts of the country it is correspondingly rare. But in the poorer pockets of less wealthy states it remains disturbingly common. According to the American Cancer Society, more than four thousand women in this country will die from the disease this year. Women who develop cervical cancer in Alabama are more likely to die than their counterparts in any other state—and in recent years Alabama's mortality rate has been rising.

In 2018, Human Rights Watch published a report identifying some of the reasons for Alabama's outlier status. Sex education is not mandated in the public schools, which may help to explain why the state ranks low in H.P.V.-vaccination rates. In small towns and rural areas, the number of doctors and medical facilities has fallen, contributing to the proliferation of a disease that disproportionately affects poor women and women of color. The Human Rights Watch report found that Alabama women without medical insurance routinely delayed getting care, "which, for some, meant that gynecological cancers weren't found until symptoms developed to more advanced stages."

The Alabama Department of Public Health does operate a few programs that encourage prevention, including one that provides free screening for cervical cancer. But, because the program has a small budget and little funding for outreach, many poor women are unaware that it exists. Human Rights Watch found that only eighteen per cent of eligible women were using the program.

Tonya Carter, overwhelmed by pain, eventually visited a clinic in downtown Anniston which caters to low-income people. She was discharged without receiving any diagnostic tests. "They didn't even check my vitals," she told me. The doctor, who criticized her for not having a gynecologist, said, almost in passing, "Why haven't you contacted the health department?" She said nothing about free screenings. After visiting the clinic, Carter called her county health department, and learned of the state's screening program. By the time she got a test, the cancer had spread.

I met Carter on a damp, overcast morning in December, a few weeks after she received the diagnosis of Stage IV B cancer. She had invited me to accompany her to a CT scan at an outpatient clinic. She is forty-eight, with pale-blue eyes and a diffident manner. Her scalp was bare, from multiple rounds of chemotherapy, and her short-term memory was spotty—"chemo brain," she called it. The drugs had made her so fatigued that it was hard for her to get out of bed in the morning.

Nevertheless, Carter had forced herself to wake up early that day; like all her cancer-related medical appointments, the CT scan took place sixty miles west of Anniston, at a clinic near Birmingham. Since 2010, fourteen hospitals in the state, more than half of them in rural areas, have closed, forcing women to make long treks to get care. Corporate consolidation and low reimbursement rates from the federal government have contributed to the trend, but another major factor is Alabama's refusal to expand Medicaid. For years, the emergency rooms of rural hospitals have been inundated with poor, uninsured patients. Hospitals often receive no compensation for treating these patients, which lowers their operating margins and fuels what the Chartis Center for Rural Health has called a "closure crisis." In February, the organization reported that the eight states with the highest number of rural-hospital closures since 2010 had all declined to expand Medicaid.

Carter's fiancé, Patrick Poore, a soft-spoken man wearing rimless glasses and a Crimson Tide sweatshirt, had driven her to the appointment. Afterward, they invited me to lunch. They told me that they'd prayed together that morning, hoping for some good news. As Carter's condition worsened, she had to tell Comfort Keepers that she was too sick to work; as a result she lost her main source of income.

The one thing that she no longer had to pay for was medical care. The irony was not lost on her. "It took me having *cancer* to get some assistance," she said. "If I was going to yearly checkups, it could have been caught way before. If I'd had the means, the insurance, prior to that, then it would have been prevented."

Carter wondered how much longer she would be around to care for her children, including her youngest daughter, a seventeen-year-old who has diabetes. "There are days when I'm depressed," she said. "I worry about my children, and what their life would be like if I wasn't there." Tears pooled in her eyes. Carter then told me that she and Patrick, whom she began dating a few years ago, were in love, but that he was hesitant to marry someone who was terminally ill. "I want to know what it's like to be married with him—to have a life with him," she said, her voice thick with grief. "And I don't know if that's gonna happen."

In Tuscaloosa, I met thirty-eight-year-old Laquisha Brant, who received a diagnosis of cervical cancer in 2019. She lives in a Section 8 apartment with a grime-stained entrance and bare walls. Before Brant learned that she had cancer, she was married and had a job at a nursing home. She was now too weak to work, her marriage had unravelled, and she was surviving on a combination of public subsidies and assistance from the Laura Crandall Brown Foundation—a nonprofit, based in Birmingham, that offers financial support to women with gynecologic cancer. "It's like my whole life had to stop," she told me, over lunch at a Red Lobster. She listed other things she'd lost: her hair, her eyebrows, her vigor, her appetite. One bright spot was her doctor, who, she said, had helped her through the most difficult phases of her treatment. "She cried with me," Brant said. But, though she was hopeful that her final chemotherapy treatment, in early December, would put her cancer in remission, she was unsure whether she could continue to get follow-up care, since a nurse had called her recently to inform her that her Medicaid was being cut off. Jennifer Young Pierce, a gynecologic oncologist in Mobile, told me that although low-income people with breast or cervical cancer qualify for Medicaid, the benefits were often discontinued once the disease went into remission. "It's 'Good news, you're cancer-free!'—and then they drop you like a hot potato," Pierce said. More than sixty per cent of cervical-cancer recurrences take place in the two years after an initial round of treatment has been completed. Any lapse in coverage could have dire consequences, Pierce said, since recurrences were "more often lethal than not."

Pierce has been fighting for years to get Americans to change their approach to cervical cancer. A South Carolina native, she first witnessed the link between poverty and the disease while she was in medical school. As part of her residency, she worked in an outreach clinic in Cape Town, South Africa. The clinic's director, Lynette Denny, had set up examination rooms in shipping containers, so that impoverished women living in remote townships could be screened for cervical cancer; in developing countries, the disease remains one of the leading causes of women's death. Denny urged Pierce to provide similar services for vulnerable women in her own community. In 2012, Pierce and a colleague launched an organization called Cervical Cancer-Free South Carolina, and also helped run a mobile-clinic outreach unit that dispatched an R.V. to rural areas to offer Pap smears.

A few years ago, a friend recruited Pierce to come to Alabama, where the cervical-cancer problem was even worse. She now runs the Cancer Control and Prevention program at the Mitchell Cancer Institute, in Mobile. One of her missions, she told me, was to educate other doctors in the state about the H.P.V. vaccine, which many pediatricians in Alabama recommend halfheartedly, perhaps accepting the unfounded view that it encourages sexual activity. Pierce told me that she's been going "door to door," trying to persuade pediatricians to push back when families resist vaccinating. It was difficult work, she said, not least because two dozen counties in Alabama had no pediatricians, which meant that she had to "track down family-medicine doctors," who are less likely to offer vaccinations in the first place. She also had to treat the gravely ill women who flowed into her clinic "like the tide." On Christmas Eve, she'd attended to a young woman in her mid-twenties as she died of cervical cancer. Pierce informed the woman's parents and siblings, who rushed to the intensive-care unit to say goodbye. Everyone in the room was sobbing, Pierce recalled. Even when cervical cancer was caught at an early stage, she said, the standard treatment was "a horror"—weeks of intensive radiation that caused aneurysms, sexual dysfunction, infertility, and scarring. "There are days when I feel like we are on the front lines of an epidemic that nobody wants to talk about," she told me.

Along with increasing vaccination rates, broadening access to health care is an obvious way to fix the problem. But, in much of the South, a surprising number of the poor and working-class people who would benefit from changing the system are opposed to doing so. A few years ago, Jonathan Metzl, a psychiatrist and sociologist at Vanderbilt, began organizing focus-group discussions near churches and low-income housing projects in Tennessee, which, like Alabama, had refused to expand Medicaid under the Affordable Care Act. At one such meeting, in Nashville, a group of working-class white men were invited to talk about the health-care system. Many of the participants—amputees, men with oxygen cannisters—were in visibly poor health. Some acknowledged having to rely on various forms of assistance to deal with their ailments. "I would be dead without Medicaid or the V.A.," one man said. But, when Metzl asked about the role of "government" and about programs such as the Affordable Care Act, a man complained that people on welfare with "ten and twelve kids" were abusing the system. Another claimed that "illegal mothertruckers" received all the benefits, and that ordinary Americans were subsidiz-

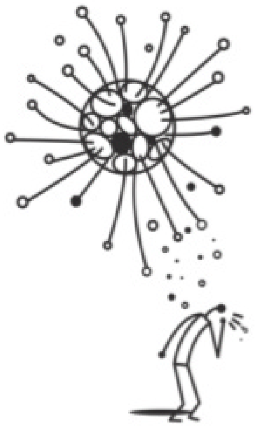
"He can't play this game, because I'm playing Only Child."

ing them. A flurry of complaints about Mexican immigrants followed, prompting one man to say, "We're starting to sound like Donald Trump."

In 2019, Metzl published a book, "Dying of Whiteness," in which he argued that people who voiced such views, fuelled by racial animosity and "the toxic effects of dogma," ended up supporting policies that put their own lives at risk. "No way I want my tax dollars paying for Mexicans or welfare queens," a white former cabdriver suffering from terminal liver disease told him. "Ain't no way I would ever support Obamacare, or sign up for it. I would rather die." A growing body of evidence suggests that clinging to such beliefs has indeed shortened lives. States that expanded Medicaid under the Affordable Care Act have seen reductions in mortality from kidney failure and cardiovascular disease, along with an increase in early-stage cancer diagnoses. They have also seen lower rates of infant and maternal mortality. A study published last July by the National Bureau of Economic Research estimated that, from 2014 through 2017, states that expanded Medicaid saved the lives of more than nineteen thousand adults between the ages of fifty-five and sixty-four alone. In the states that rejected expansion, the researchers concluded, fifteen and a half thousand lives were lost.

The data, though striking, may not be enough to loosen the hold of racial resentment. As Metzl and others have pointed out, states where benefits are scarce are precisely where this kind of anger is most likely to flourish. Since the early two-thousands, the journalist Thomas Frank and other writers have argued that Republicans, by harnessing such frustrations, have repeatedly persuaded many working-class citizens to vote against their economic interests. Metzl contends that Republicans have been just as adept at getting lower-income whites to vote against their "biological self-interests."

Tonya Carter, of Anniston, told me that she didn't follow politics closely—her fate, she liked to say, was in God's hands. But, in our initial phone conversation, she said that if she had been able to get insurance through the Affordable Care Act she surely would not have developed advanced cancer. This made me think that, unlike the working-class men quoted in Metzl's study, she believed that the government has a responsibility to care for people who cannot afford to pay for health insurance. When Carter and I met, she told me how optimistic she'd been when she first heard about the A.C.A. "I was so excited," she said. "I was hoping that it would benefit me." Then she went online and learned that the cheapest plan cost hundreds of dollars a month—far more than she could afford. Her enthusiasm gave way to bitterness. "What came out of Obama's mouth?" she said. "'Every citizen will have insurance.' And it failed. To *me*, it failed, and I'm pretty sure there are other people in my shoes who feel like it failed."



But Carter did not fully comprehend *why* the Affordable Care Act had "failed" in Alabama. She didn't realize that, in the three dozen states that have expanded Medicaid since 2014, the law had made it possible for millions of low-income people to get insurance at no cost. When I mentioned this, she looked surprised and distraught. "It's pretty upsetting to hear," she said. She was even more perturbed to hear that a common reason cited by politicians for rejecting Medicaid expansion was a desire to avoid burdening taxpayers. "I wonder what those people who don't want their taxes to be raised—what if they had a loved one in my shoes?" she said. "What's the cost of giving the citizens of Alabama insurance versus allowing us to die?"

According to a study conducted by David Becker, an economist at the University of Alabama at Birmingham, expanding Medicaid would by now have cost Alabama seven hundred and seventy-one million dollars—a figure that reflects both treatment costs and administrative expenses. But Becker calculated that, even with the federal matching rate for new Medicaid enrollees starting to fall in 2017, these costs would be more than offset by folding existing state programs into Medicaid, and also by levying taxes on the billions of Medicaid dollars spent in Alabama. Indeed, he believed that expanding Medicaid would generate a net *surplus* of nine hundred and thirty-five million dollars. Becker told me recently that he had expected his study to inspire "some debate" in the Alabama legislature. "That never happened," he said. Perhaps this was because many of the voters in Alabama who stood to benefit most from Medicaid expansion kept backing politicians who opposed it. As I discovered, Tonya Carter was one of those voters. Although she didn't consider herself to be a political person, she told me that in the 2016 Presidential election she voted for Donald Trump, who is intent on overturning the Affordable Care Act.

"I had my reasons," Carter said of her vote. Trump is a businessman who, she figured, could "help the economy, maybe make a difference." I asked her if this had happened in Anniston. "Not yet," she replied.

She then mentioned another reason that she supported Trump. It really bothered her that "foreigners" could come to America and "get free health care, free assistance in living, food stamps," while many U.S. citizens were denied these things. "It's not right when you are born here, and you pay taxes, and you work your tail off your whole entire life, and you still can't get health insurance," she said. "But a foreigner can cross the border and they *instantly* get their needs met." She paused. "That's one reason why I voted for Trump. I don't think it's right."

Jim Carnes, a health-policy expert at Alabama Arise, an antipoverty organization, told me that expanding Medicaid would provide coverage for roughly three hundred and forty thousand additional Alabamians. About half of the newly insured would be low-income whites. Carnes doubted that this was common knowledge among white Alabamians, given the deeply ingrained popular association of public benefits with poor African-Americans and Latino immigrants. Robyn Hyden, the executive director of Alabama Arise, told me that early in her career, when she was an organizer in northern Alabama, she tried to educate low-income people about health care and the Affordable Care Act. "When you actually talk to

"You knew I was a cat lady before you married me."

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people about the policy, it's very popular" among both liberals and conservatives, she said. "But, in general, people don't come into the room knowing about it. They've heard a partisan message about it."

Broadening access to health care in such states as Tennessee and Alabama would not, of course, benefit whites alone. A few days before meeting Tonya Carter, I drove to the Vaughan Regional Medical Center, in Selma, in the heart of Alabama's Black Belt. Named originally for its rich, dark topsoil, the Black Belt was once dotted with cotton fields and slave plantations. During the civil-rights movement, it was a center of political ferment. More recently, the region has become known for the staggering poverty among its majority-African-American residents. In 2017, Philip Alston, the U.N.'s Special Rapporteur on extreme poverty and human rights, visited the Black Belt, and saw raw sewage being dumped outside homes in rural areas; he told a local reporter that he had never seen such deprivation in the First World.

The rural counties in the Black Belt were the focus of the Human Rights Watch report on cervical cancer. As the report noted, black women in Alabama are almost twice as likely as white women to die if they develop the disease. Experts attribute this to racial discrimination that is embedded in the health-care system and to the likelihood that, when African-Americans do receive care, it is often of lower quality. The Human Rights Watch report notes that, "even when Black women with cervical cancer earn as much as white women, they are still at higher risk of death from the disease."

Among the physicians quoted in the report was William Michael Stevens, an ob-gyn who runs the women's-health clinic at the Vaughan Regional Medical Center. In the report, Stevens described the case of a woman in her twenties who had come to see him because she was bleeding after intercourse. She had gone to the emergency room three times, but had not received a pelvic exam on any of the visits. She hadn't undergone a Pap smear in years. When he performed an exam, he discovered that she had advanced cervical cancer.

"There's been several cases like that," Stevens said when I visited him, in his cluttered office, on the fourth floor of the hospital. In his view, the medical system was not always to blame. Sometimes patients who had gone to screenings and had abnormal Paps didn't return for follow-up procedures. "Compliance is a big problem," he said. But Stevens, who grew up poor, added that he understood why women in the Black Belt sometimes failed to make it to appointments. Getting a colposcopy cost several hundred dollars, which patients without coverage often couldn't afford, and many patients had to drive long distances to reach his office. He opened a red folder on his desk and pulled out a pamphlet comparing Alabama's rural counties in 1980 and in 2019. In the 1980 map, forty-five of the fifty-four rural counties had hospitals that provided obstetric services. In the 2019 map, just sixteen did. This, too, was a product of Alabama's refusal to expand Medicaid, which led rural hospitals to cut essential services in order to avoid going out of business. Stevens pointed to several counties surrounding Selma: Wilcox, Chilton, Lowndes. "None of these counties have any ob-gyn coverage," he said.

Dallas County, where Selma is situated, once had three hospitals. Today, the Vaughan Regional Medical Center is the only one that remains open. When Stevens first joined its staff, he was one of seven ob-gyns. He now had just one colleague, Shawnequa Brown, who first visited Selma to attend a nephew's high-school graduation. In 2018, she came back to serve as a medical provider, because, she told me, "there's such a need." One factor driving the need was episodic health-care coverage. Many women in the area would see a doctor while pregnant, because they qualified for Medicaid, but stop going when coverage was withdrawn. "Once they're no longer having children, they just don't get checked," Brown said. Another problem was a lack of education, which sometimes led women to think that they'd been given cancer screenings even though they hadn't. "I'll ask a patient, 'When was your last Pap smear?'" Brown said. The patient would say, "Oh, I had one at the emergency room." Then Brown would check and discover that the procedure was actually a speculum exam, which does not screen for cancer.

Isabel Scarinci, a behavioral psychologist at the University of Alabama's Division of Preventive Medicine, said that, among poor women, a lack of education was sometimes compounded by a sense

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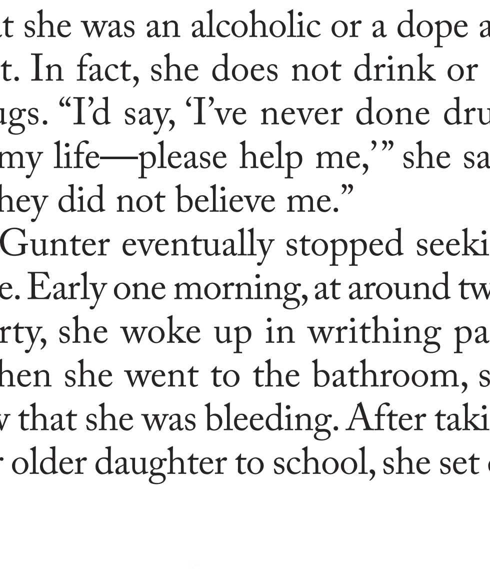
of resignation. "Women may think, If I find out I have cancer, how can I deal with it?" she said. Scarinci is one of the leaders of the Deep South Network for Cancer Control, which trains local volunteers who work to reduce rates of disease in low-income minority communities.

Shortly after visiting the hospital in Selma, I drove thirty miles northwest to Marion, a small town in Perry County, to visit a nonprofit called Sowing Seeds of Hope, which works with Deep South Network volunteers. Housed at the end of a rutted dirt path, it operated everything from a weekly hypertension clinic to a child-screening program for vision problems. Its executive director, a nurse named Frances Ford, described these services as "Band-Aids" in a county where more than one in three people were poor. We walked to a low-slung building on the other side of the dirt path: the Perry County Health Department. While there, we spoke with Pilar Murphy, a pharmacist, who catalogued the obstacles patients faced. "Some of it is transportation, some of it is funds," she said. "Some of it is just knowing how to traverse through the health-care system."

I asked Murphy how much of a difference it would make if Alabama expanded Medicaid. "It would be huge," she said. She described the case of a sixty-two-year-old man with a history of cancer and diabetes who had recently lost his medical insurance. Murphy had helped him find low-cost options for his diabetes medication, but the man still had to pay out of pocket for follow-up care, and was consequently avoiding doctor visits.

After we chatted with Murphy, Ford took me on a tour of Perry County and drove past some of the rudimentary local housing—trailers coated in rust, shacks missing doors and windows. We pulled up to an attractive red brick building set behind a metal fence and a line of trees: the former local hospital. Ford had been advocating for Perry County to open a new one—she understood how difficult it could be for poorer residents to drive several hours to see a specialist. After her own mother learned that she had cervical cancer, in 1980, she had been forced to drive all the way to Birmingham for care. In the car, Ford reached into her coat pocket and handed me a letter that her mother had written. Addressed to her children, it described her waning energy and a mounting sense that there might not be "many more tomorrows." A few weeks later, Ford told me, her mother died.

One day, I met a woman named Lacie Gunter, a single mother with two young daughters who lives in a housing complex in West Mobile. A few years ago, she began feeling pain in her side. When the pain grew excruciating, she started showing up at the nearest emergency room, hoping to see a doctor. She'd been on Medicaid when she gave birth to her younger daughter, five years ago, but when she presented her Medicaid card she was informed that her coverage had lapsed. She told me that, at these E.R. visits, she was never given a Pap smear or encouraged to get a cancer screening. (None of the women with cervical cancer I interviewed in Alabama had been aware of the free screenings.) Gunter did receive plenty of judgmental looks, from nurses who saw her address, and her bad teeth, and assumed that she was an alcoholic or a dope addict. In fact, she does not drink or do drugs. "I'd say, 'I've never done drugs in my life—please help me,'" she said. "They did not believe me."



Gunter eventually stopped seeking care. Early one morning, at around two-thirty, she woke up in writhing pain. When she went to the bathroom, she saw that she was bleeding. After taking her older daughter to school, she set off for her mother's house to drop off her younger daughter, thinking that she could then head to the hospital. But on the way to her mother's house she began feeling light-headed. She pulled into a Dollar Store, where she bought some Tylenol and went into the bathroom to try to stanch the bleeding, which had got heavier. From the parking lot, she called her parents and told them that she needed help. Her father picked her up and drove her to the emergency room. Gunter told the nurses, "I'm dying—I'm bleeding out." After twelve hours of waiting and a series of examinations, she was transferred by ambulance to Children and Women's Hospital, where a gynecologic oncologist performed a biopsy, under anesthesia, and initiated instant radiation. Later, Gunter learned that she had advanced cervical cancer.

By the time I met Gunter, in November of last year, she had undergone months of chemotherapy and radiation treatment. She was hopeful that the cancer would go into remission, but she knew that, if it did, she could once again be without insurance. "I'm terrified," she told me.

Her physician was Jennifer Pierce, the gynecologic oncologist, who was on call at Children and Women's Hospital on the day that Gunter was brought in. Pierce said that Gunter had been lucky. "A patient who is hemorrhaging from cervical cancer without appropriate medical care absolutely could die—quickly," she told me. Pierce explained why Gunter's illness should never have advanced so far. One missed opportunity came in 2010, when Gunter, at the age of twenty-one, gave birth to her first daughter: she could have been administered the H.P.V. vaccine during that hospital visit. Then there was the period after Gunter's Medicaid lapsed, when she stopped getting checkups or seeing a doctor.

Gunter is thirty-one, with dark-brown hair and a weary gaze. Like Tonya Carter, she told me that she is not a political person, but she grew angry when recalling how she felt during her visits to the E.R. "Had they just given me *one chance* to explain the type of pain I was in, had someone just done one simple exam, they would have found it," she fumed. "I was not treated like I was even a person, really." Gunter told me that she still woke up every morning to braid her daughters' hair, but she worried that her physical limitations might cause them to suffer. Before getting cancer, she'd hoped to be trained as a welder; now she wasn't healthy enough to begin searching for a job. "I wake up and I'm in pain, I go to sleep and I'm in pain," she said. "I'm stuck—I've got girls to take care of, and I don't have very much help." A proud Alabamian who told me that there was no other place she wanted to live, she expressed frustration about

"Just because they all work from home now doesn't mean I don't still keep an eye on them."

another thing: when people in Alabama talked about protecting "life," it always seemed to be about unborn babies, and never about poor women like her. "That bothers me to my core," she said.

To Gunter, this smacked of hypocrisy. But it was also possible to see Alabama's strict anti-abortion laws as consistent with the state's general lack of concern for the health and well-being of poor women. "In Alabama, we have one of the highest maternal-mortality rates in the country," Jennifer Pierce told me. "It is more lethal to be black and pregnant in Alabama than in some poor countries."

Pierce and other activists have had some success in their fight against cervical cancer. Since 2010, the proportion of adolescents in Alabama receiving a dose of the H.P.V. vaccine has increased from forty-six to sixty-five per cent, and there are signs that opposition to the Affordable Care Act has begun to soften. "It's a function of distance from the Obama Administration," Jim Carnes, of Alabama Arise, told me. It was also a function of Alabama officials seeing health indicators in other states improve while their own population suffered and rural hospitals slid further into crisis. Cervical cancer was just one aspect of the problem: a vascular surgeon in Montgomery described to me a similar pattern with heart disease. People sought medical attention only during a heart attack, or after developing extensive vascular disease. Such delays put lives at risk and, the surgeon pointed out, also drove up the cost of care.

In the past few years, a number of conservative states that had initially opposed the Affordable Care Act, including Virginia and Louisiana, have reversed course and expanded Medicaid. Edward Partridge, a gynecologic oncologist and a former director of the University of Alabama's Comprehensive Cancer Center, believes that this will soon happen in Alabama. When I asked him why, Partridge, who is a Republican, said, "It's insanity—how long can insanity last?" J. David McCormack, the C.E.O. of the Vaughan Regional Medical Center, the last remaining hospital in Selma, told me, "I'm a conservative person. But we've got to do Medicaid expansion." The spread of COVID-19 further imperils the state's health-care system. On March 24th, David Becker, the economist, published an op-ed in the Birmingham *News* arguing that, given the threat posed by the pandemic, "now is the time to finish Medicaid expansion in Alabama."

One person who has yet to come around to this position, at least publicly, is Kay Ivey, Alabama's Republican governor. Ivey, who has the authority to sign a rule change that would expand the program, declined to comment for this article. But she is surely aware that many people in her state lack health care. Ivey grew up in Wilcox, a county in the Black Belt which, a few years ago, had to scramble to prevent its only hospital from closing. Last year, she was among the elected officials who received a copy of a report issued by the Alabama Study Commission for Gynecologic Cancers, a coalition of medical specialists, administrators, and survivors appointed by the Alabama legislature and the state's governor. The report contained some startling passages. "Cervical cancer is almost entirely preventable and yet in Alabama there are areas where women are dying at a rate similar to that of developing nations," it noted. It also pointed out that Alabama has the third-highest ovarian-cancer mortality rate in the country, even though cases of ovarian cancer are slightly less common in the state than in the U.S. as a whole.

These findings may not move Ivey, who, in 2018, proposed establishing a work requirement for the small portion of parents and caregivers in Alabama who receive Medicaid, forcing poor people who must care for a child or a disabled adult to find jobs or lose their benefits. (The proposal remains before the state legislature.) But Ivey, who is seventy-five, has since had some health problems that may have deepened her appreciation of how essential access to medical care can be. Last August, during a routine medical exam—the kind of checkup that women without insurance usually go without—a doctor discovered a small malignancy in her lung. Fortunately for her, the cancer was detected early, and treated immediately, with stereotactic body radiation therapy, at a state-of-the-art oncology center in Montgomery. In January, scans revealed that Ivey was cancer-free. "I am profoundly grateful for this good news," she announced, thanking God, her "dedicated team of physicians," and "the good people of our great state." ♦

A REPORTER AT LARGE

Dancer in the Dark

Sharon Stern devoted herself to an art form. Did her mentor lead her down a dangerous path?

BY RACHEL AVIV

Sharon Stern arrived at Naropa University, the first Buddhist-inspired university in America, with a portfolio of glamorous head shots. She had a heart-shaped face and a guileless smile. She was twenty-eight and had recently married Todd Siegel, whom her friends all described as the perfect husband. Naropa, which was founded in Boulder, Colorado, in 1974, by a former Buddhist monk, has three meditation halls that students visit throughout the day. "You are encouraged to let go of habitual patterns of thought, feeling, and action and to continually refresh your experience, viewing yourself and the world anew," read the welcome letter from the dean of students. Sharon, who was in the master's program in contemporary performance, had spent several years acting in community theatre in Miami, but she wasn't sure where the work was leading. In her journal and notes, she assessed her flaws: she was "overly excitable"; her work could be "cheesy"; she was "not enough of a leader"; her sense of self was "defined by who wants me."

She had grown up in a high-rise in a part of North Miami where people dress for the beach even when they are miles away. Her father, Tibor, an Israeli diamond dealer, had teased her on the rare occasions when she didn't get all A's. "You disturbed the straight line," he told her. She went to a Jewish day school, where her drama teacher, Lillian Andron, described her as "Ms. Popularity, Ms. Congeniality." Her nickname was Sharoni, and when she wrote it she dotted the "i" by sketching a tiny flower. She had thrived in a culture that by her mid-twenties she saw as shallow and spiritually arid.

Benjamin Stuber, a classmate at Naropa, told me, "For the more ambitious, type-A students in the class—and I include Sharoni in that group—the spiritual side of Naropa kind of snuck up on us. I don't think we expected to be as moved as we were." The M.F.A. program existed, he said, at the intersection of postmodernism and Buddhism. "It was about saying, 'We are going to kill off these old dualisms, like light and dark, good and bad, dirty and clean, and start to sit with things as they really are.'"

At Naropa, Sharon became self-conscious about the ways in which she had always used her strengths—charisma, warmth, an intuitive capacity to please—as crutches. She had once felt that the ingredients of a fulfilling life were fairly straightforward. "All I wanted is to be married to Todd and be a mother," she said. But that path felt increasingly stale. She was working on "re-integrating, re-patterning, re-structuring," she wrote to a high-school friend. In her school notebook, she instructed herself to "contemplate uncertainty" every morning. She wondered if she should project a quieter presence. "Maybe I have the need to talk so much in class and offer so much of my opinion because I don't actually take the time to process things on my own," she wrote. In the margins of "The Essential Chögyam Trungpa," a book of teachings by the founder of Naropa, she wrote, "Can we practice meditation w/o being afraid of the foreignness?"

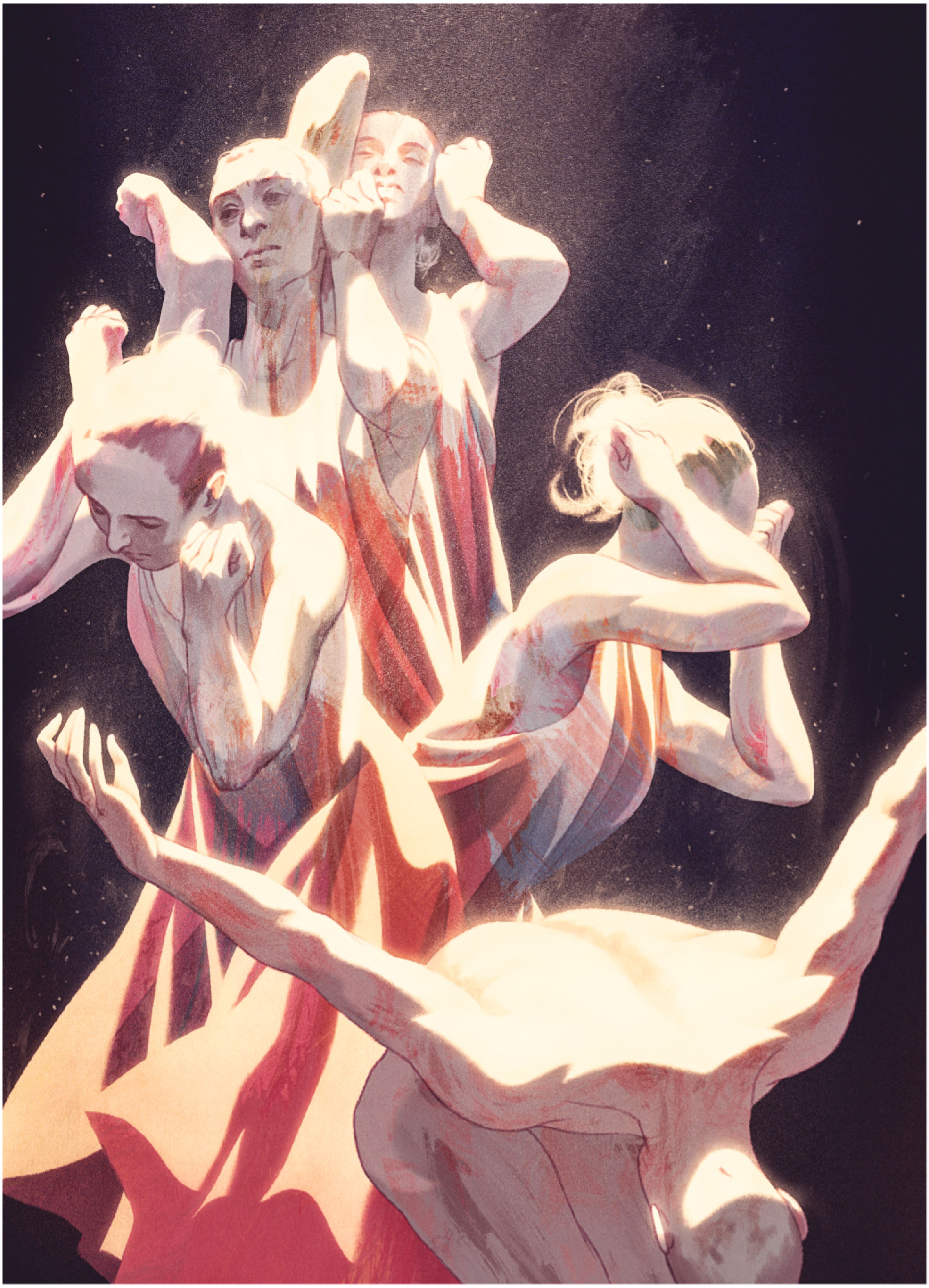
In her first semester, in 2007, she took a class with Katsura Kan, a guest artist at Naropa and one of the world's most prominent choreographers and instructors of Butoh, a postmodern Japanese dance form. A sinewy, youthful fifty-nine-year-old with a shaved head, Kan was polite and somewhat remote. He had studied Zen Buddhism for three decades, and he gave clipped, heavily accented instructions that sounded like koans. "To seek the door to the neutral is to approach transformation," he told the students. Stuber, in his notebook, wrote, "Butoh begins with the abandonment of self."

Kan is based in Japan, where he studied with Tatsumi Hijikata, one of two choreographers credited with establishing Butoh as a distinct art form, in the nineteen-fifties. It was originally called *ankoku butoh*, the "dance of darkness." Hijikata's choreography was asymmetrical, erotic, and halting, requiring intense muscular control, and it often had an undertone of dread. In one of his most famous performances, "Story of Smallpox," Hijikata appeared onstage hunched over, looking feeble and diseased. He made barely perceptible movements. The audience heard the sound of wind and the cawing of crows.

Hijikata, who was influenced by French Surrealism, taught his apprentices to understand Butoh as inseparable from daily life. According to the Butoh scholar Caitlin Coker, he and his students ate together—"There was even Butoh in eating a meal," one dancer said—and he trained them to relinquish the idea of individual expression. One former apprentice, Waguri Yukio, said that Hijikata received phone calls from parents saying, "Give me back my daughter." But Hijikata used to say, "The person who is kidnapped will become the most skilled."

One of Sharon's classmates said that he remembers the day that "Butoh suddenly made sense to her." Kan asked the students to imagine that ants were crawling up their limbs and taking over their bodies, an exercise designed to help them find new vocabularies for physical expression. After the class, Sharon curled up on the floor and began crying. "Until then, it was as if there had only been this small corner of her own psychology that she felt comfortable with—the weather was always sunny there," the classmate said. "In actor training, we think of that as blockage. But from then she stopped fighting it. She was willing to transform."

At the end of the semester, Kan chose



In Butoh, a Buddhist-influenced Japanese dance, performers are often encouraged to surrender parts of the self.

ILLUSTRATION BY LEONARDO SANTAMARIA

six students to perform a work he had choreographed. Like nearly all Butoh dances, the movement was slow, meditative, and quiet, close to the floor. The students wore white paint on their bodies and faces. Sharon performed a duet with Stuber, who recalled, "There was a lot of rolling and twisting, and our bodies kept going round and round like we were some sort of ball. It was about being in this place where identity is still mutable." After the performance, he remembers, Todd Siegel told him, "I couldn't tell which one of you was my wife."

For her thesis project, Sharon decided to create a Butoh-inspired piece "about the road to emptiness," as she described it in her journal. She wanted to work on "entering the darker places of myself, fearlessly." She asked Kan for guidance on Buddhist views of aging, disease, and death. "I want to have a serious conversation with you about this," she told him.

Stuber said that it wouldn't have surprised him if Sharon had developed a crush on Kan. "I had a little crush on him, too," he said. "We talked a lot about mentorship in the arts, about transference and counter-transference." He was impressed by Sharon's openness to new experience, which, he said, reminded him of the "tender heart of the warrior" that Chögyam Trungpa, Naropa's founder, describes in one of his teachings. "The strongest warrior is not the one who wears layers of armor," Stuber said, "but the one who puts down her sword and shield, takes off her armor, and opens her heart—she is the brave one."

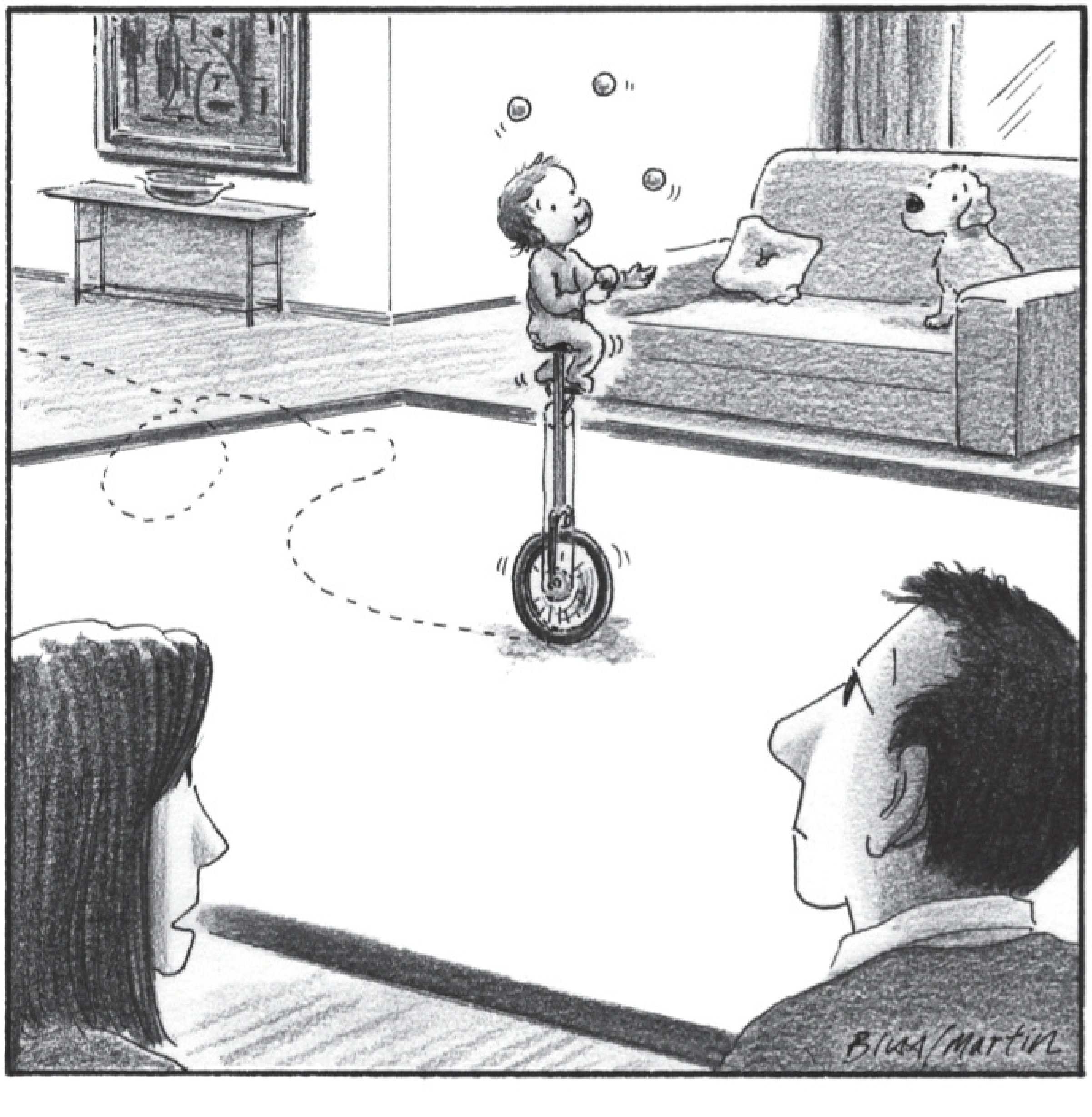
All artistic mentorship requires a certain level of devotion and imitation, but in choreography the influence tends to be more literal. One body is taking direction from another. The critic André Lepecki describes choreography as "a body snatcher." The dancer, he writes, is "nothing more than a faithful executor of the designs of the absent, remote, perhaps dead, yet haunting power of the master's will."

Barbara Dilley, Sharon's adviser at Naropa and the founder of the school's dance-and-movement program, often spoke with students about the importance of questioning the role of the guru, in both Buddhism and art. "She didn't want us to fall into the trap of trying to please someone, of losing ourselves on the path," Sharon's friend Kathryn Ross said. In class, Dilley asked her students to experiment with taking different degrees of influence from one another. "You learn to become aware of the other person's power in the room," Dilley told me. "And, rather than mirroring, to make choices."

The Japanese tradition of artistic mentorship doesn't easily translate to American culture. Because of Kan's status in Butoh circles, he was referred to as a sensei, or master. "If you are a sensei, you have a responsibility that is more communal or familial than a teacher would take on in the United States," Heyward Bracey, an American dancer who studied with Kan in Japan, said. "It requires a deeper level of trust, a more evolved bond." The teacher's guidance often extends beyond the level of craft. Vangeline, the director of the New York Butoh Institute and the author of a forthcoming book about Butoh, told me, "When a Japanese Butoh teacher comes to the West, they may start emphasizing that the student needs to be less egocentric, less individualistic. When an admired teacher suggests that the student's values are in question, how does that affect her sense of identity? What happens in that cognitive dissonance?"

Sharon worried that her movements weren't authentic enough. "Am I really a butoh dancer or is this the ultimate in seeking validation and support from the outside?" she wrote in her journal. She asked for Kan's help in trying to "escape this father mother voice inside." Although he encouraged her to be less competitive, she couldn't shake the desire to be the best—his "number one student."

After Sharon graduated, in 2009, she helped Kan stage a performance called "Luminous Emptiness," an adaptation of the Tibetan Book of the Dead, created by Naropa students. She was so committed to the work—"This is what I expect from you," she e-mailed him, "to take up all my time!"—that he asked her to be an assistant choreographer of his dance company, Katsura Kan & Saltimbanques. She taught his choreography to the other performers and danced with him. In an interview with the Boulder *Daily Camera*, she said, "I haven't



"Encourage or discourage?"

found any other form so far in my life that I feel so connected to in a profound, cuts-across-cultures-and-boundaries way."

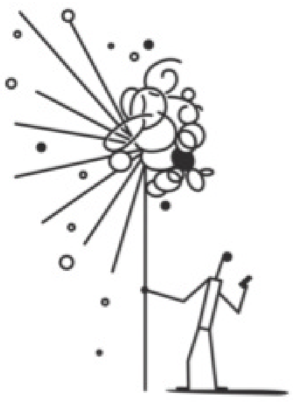
When her parents came to see her dance in Boulder, they were taken aback. Sharon's mother, Hana, is an Israeli immigrant who has her own diamond-jewelry line and radiates "protective feminine energy," as Sharon once wrote. When I met Hana, she was wearing a diamond ring about the size of a quarter, and a diamond Star of David around her neck; her blond hair was in a white scrunchie. I asked Hana if she considered Sharon a seeker, and she told me, "Of course she was seeking—for more perfection." But Butoh struck Hana as a wrong turn. "I don't see where the art is here," she told Sharon. Tibor said, "It was a terrible shock. The dancers were crawling on the floor and suffering." Sharon told her parents, "We are not here to please the audience."

In early 2011, Kan invited Sharon to join him as his dancing partner on a tour through the U.S. and South America. When she performed a duet with Kan in Seattle, the Seattle *Times* observed, "The two performers did indeed seem to be on a voyage." She told a friend that she and Kan, who was married, "fit together like a hand in a glove." They shared a room together during the tour, as Kan sometimes did with other dancers. Kan said that their relationship was never sexual, but Sheri Brown, who danced in Kan's company and became close with Sharon, said that it seemed clear there was a sexual element to their dynamic. She told me, "Dancers will say, 'O.K., the body is a canvas, and it doesn't have to be sexual—how do we view it from other perspectives?' But, basically, in a lot of Kan's choreography, especially with Sharoni, the dancers were topless." Brown told Sharon, "'I know you are attracted to him and that's beautiful, but I think it would be really messy if anything happens.' Sharoni pretty much promised that she wouldn't sleep with him." But, later, Sharon suggested to Brown that this promise had been broken.

Just seeing Kan's handwriting on a scrap of paper, Sharon told him in an e-mail, made her realize "I have not yet mastered my attachments in life." She pulled away from Todd, who had been supportive of her career; by the end of the year, they had separated. Kan wrote Sharon, "Let's keep seeking together till end of life? Or more?"

* * *

In most contemporary art, it can seem a little regressive, or at least unfashionable, to associate art with spiritual practice, but in Butoh mastery of the dance is often contingent on being able to surrender parts of the self. Sharon told Kan that she was working to find "the strength to reject society and the past and everything that I think has been real until now." She had an excellent work ethic, which she applied to the paradoxical ambition of freeing herself from the grip of the self. "Just stay empty," she wrote in her journal. "Believe in nothing / emptiness / void."



When another Butoh dancer, Jeremy Williams, saw Sharon in New York in February, 2011, he was struck by how deeply she had become immersed in the form. "Sharoni was enamored of Butoh not just as an aesthetic but as a perceptual shift," he said. "I remember her asking me, 'Don't you just want to stay in that Butoh space all the time?' And I was, like, 'No, I don't. When I'm doing Butoh, it disrupts my relationship to the everyday, material world, and I can't move through the world that way.'"

Butoh performers often describe the necessity of becoming empty vessels. In an essay in the "Routledge Companion to Butoh Performance," Shinichi Iova-Koga wrote that he learned to "erase myself so that I could dance." Butoh, he said, "yanked the 'me' out of me." The Swedish Butoh performer Susanna Åkerlund described how the dance brought her into an altered state of consciousness. "My hands are not hands, my face not face, my feet not feet," she wrote. "The space inside of me and the space around me are one and the same."

Through Butoh, some dancers come to see their sense of self as illusory, an understanding that reflects the Buddhist ideas intrinsic in Japanese culture. Buddhist religious texts acknowledge that this awareness can invite psychic distress—a state that some Buddhist masters have called "falling into emptiness." The person may become disconnected from her identity, which suddenly seems false, a cultural construction. According to traditional Buddhist doctrine, recognizing the insipidness of our existence is a step toward liberation; in confronting the vanity of ordinary life, we gain the resolve to relinquish our attachment to worldly things. But, in the past fifty years, as Buddhism has been decontextualized in the West, this insight has often been overlooked. Instead, meditative practices have been repackaged as a road to wellness.

Willoughby Britton, a professor of psychiatry at Brown University, believes that the popular representations of meditation as a "warm bath," a universally salutary activity, don't encompass the broad range of reactions to meditation. For the past decade, as part of a research project called the Varieties of Contemplative Experience, Britton and her husband, Jared Lindahl, also a professor at Brown, have been cataloguing the challenges that people experience in the process. In a recent paper in the *Journal of Consciousness Studies*, they document the ways meditation can lead to changes in sense of self, including the "dissolution of the personality structures that support the 'story of me'"—an experience that many found distressing and even disabling. One meditator told them, "It basically felt like whatever personality I thought I had before just disintegrated. And it wasn't an expansive disintegration into unity or bliss or anything like that. It was a disintegration into dust." Another said, "I would look at other people and interact with people, and they would say regular things, like 'Oh, I like that type of ice cream' or 'Oh, I like that thing.' And I remember hearing that, and I'm, like, 'Wait, how do you know that? How do you know what you like and dislike? How do you know who you are?'" Others explained that the boundary between themselves and their surroundings dissolved. A person who felt as if he no longer existed kept asking his teacher, "Tell me what I look like."

These sorts of selfless states might be likened to what Western psychiatrists call depersonalization, a condition in which people feel that they have become observers, detached from their own body and thoughts. But Robert Sharf, a professor of Buddhist studies at the University of California, Berkeley, told me, "The depersonalization to which Buddhists aspire is not supposed to result in dysfunctional alienation. The dissolution of the ego is meant to occur within an institutional and ideological framework that helps one make sense of the experience. Nowadays, people who become depressed or depersonalized through secularized meditation practices don't have access to the conceptual resources and social structures to help them handle what is happening to them."

Mauricio Sierra-Siegert, a psychiatrist who spent fifteen years working in the Depersonalisation Research Unit at the Institute of Psychiatry, King's College London, told me that a frequent topic of conversation among colleagues was whether "spiritual enlightenment resembled the state of depersonalization." Sierra-Siegert, who has practiced Zen Buddhism for thirty years and is now a professor at Colegiatura Colombiana, in Medellín, has observed that cultural expectations appear to shape the degree to which people experience depersonalization as a source of distress. When he moved from London to Colombia, he said, he was surprised to discover that although some of his patients felt that their selves weren't real, they did not seem to be suffering from this observation the way that his London patients were. "They didn't experience it as a symptom—it was not why they had come to me," he said. He believes that the disparity arises from the fact that Colombian culture is less individualistic. "If you feel like you are your own island—if you are entirely identified with your own story and image—then the experience of becoming depersonalized will be more threatening," he said.

MASK

During our self-isolation, you send me collages
of God's blown animals, breathed into, heated

and shaped like glass. Our skin is full of holes
for oil and sweat. When I whisper, *Breathe me in*,

I mean all of me—the scent of my flesh, but also me,
my god, the beginning of the fulfillment of this desire.

In a mask, you can be whoever I want you to be, king
or dog: *muse* comes from *muzzle*, to track your kill.

The plague doctors wore masks in the shape of a bird,
the beak filled with fresh clippings: juniper, rose, clove.

The mask is a type of respirator, meaning breathe again,
which is how we've managed to stay alive all these years.

Through the glass eyes, they could examine the body
they could not touch with their bare hands.

Breath can be both instinctive and controlled.
Matisse's most famous cutout is "Blue Nude II,"

a woman who appears to be made of parts, but who
was scissored instead from a single sheet of paper.

—Beth Bachmann

Britton told me that she had assumed that meditators with a history of psychiatric troubles would be the ones in her study most vulnerable to breakdown. Instead, she found that those most likely to become distressed were people like Sharon, overachievers with a high level of ambition and drive. "In the transmission of Buddhism to the contemporary West, we are not starting from similar baselines," Lindahl said. "When you are trying to undercut certain features of selfhood, because you've been told that those are the source of suffering, it can require a much greater change, and be more destabilizing, for someone from a very goal-oriented, identity-oriented society." Britton added, "I think that people underestimate how difficult it is to change your culture in terms of lived experience. You can't just decide 'I am going to reform my psyche and being according to another culture's definition.'"

In the summer of 2011, Sharon performed in São Paulo with Kan and his company. Thabatta Mizrahi, a close childhood friend who lives in Brazil, came to the performance. Sharon danced alone, topless, with her long brown hair so wild that it looked like a tent. She repeatedly started to lift herself off the floor, only to fall back again. "When I used to watch her perform, there was always a little bit of Sharon in the characters she would play," Mizrahi told me. "But this time I couldn't find her."

Mizrahi and Sharon spent three days together, and Mizrahi found her friend disconnected and emotionally blunted. She was thinner than Mizrahi had ever seen her. She had been fasting. Sharon felt she was too large, Kan said, compared with the other dancers. He urged her to eat more, telling her that in Butoh "you make your weakness into dance."

Maureen Momo Freehill, an American Butoh dancer, told me that when she trained for several years in Japan, she, too, found herself restricting what she ate. Her size, she said, came to feel like yet another imposing aspect of her American identity. "My self-referencing just became so obvious," she said. "It was: what do *I* want, *I'm* the one, it's about *me*."

Mizrahi was troubled by the way that Sharon spoke about Kan. "Admiration is good, it's healthy, it's motivating," she later wrote her in an e-mail, but not when we "lose sight of who we are." Mizrahi sensed that it wasn't Kan's personality to which Sharon was drawn but the fact that he "embodied this art form, and she had to make sacrifices to continue gaining knowledge from her mentor." At the end of the visit, as Sharon stood at Mizrahi's door, she suddenly took a lighter tone. "I know you think I look too skinny, but do I look good?" Sharon asked.

"I was, like, of all the things, *that's* what you're worried about?" Mizrahi said. Later, she wondered if what Sharon had really been asking was "Do you still see me?"

Sharon's parents also expressed concern that her personality was changing. "Since you met him and follow his teaching, you have lost your identity," Tibor wrote in an e-mail. Tibor is jovial, outgoing, and commanding; one has the sense, when talking to him, of being slightly, though not unpleasantly, pummelled. He wrote Sharon impetuous e-mails ("all this for a sick dance, that hardly anyone shows interest"), followed by apologies and expressions of love.

Kan cautioned Sharon about adopting his life style. "I think this is a bit too much for you I apologize because you have your history your world your family," he wrote. He explained that, since he had become a Butoh dancer, in 1979, he'd resigned himself to the possibility of ending up "lying stone dead somewhere by the side of the road." His goal was modest: to survive as an avant-garde artist. Sharon often went swing dancing at night, and Kan seemed puzzled by her attraction to "social dance—dance that is entertainment." He told me, "Creation is not about entertaining. Creation is very painful."

Sharon was not dissuaded. "Do you think I have more respect for money and 'comfort' than for LOVE and art?" she wrote him. "Butoh is my journey . . . through you. Big ship, small ship, stormy sea or quiet sea. I was never so clear about something in my life."

In August, 2011, a month after the trip to Brazil, Sharon went to Copenhagen with Kan for a performance called "100 Dancers." Artists from around the world took over the public spaces of the city. Kan said that, after the performance, Sharon disappeared. Hours later, she was found in a church shouting, "Coming up! A hundred dancers!" She seemed not to realize that the dance had ended. She was so disruptive that the police were called, and she was admitted to the psychiatric ward of Bispebjerg Hospital. When Kan came to the hospital, he said, two police officers told him that Sharon's parents had reported that he had kidnapped her. "I will go out with all my strength to make sure that you come back to your country and family," Tibor wrote Sharon in an e-mail. "I have no other choice, but to go after your master and his reputation." To Kan, he wrote, "I will hunt you down if you stay in touch with my daughter."

Sharon's parents flew to Copenhagen and took her back to Miami. A few weeks later, Kan wrote Sharon an e-mail clarifying the terms of their relationship: "My love has limitation, we only can share the creation on the stage." In Miami, Sharon saw a psychiatrist, who gave her a diagnosis of depression and prescribed her an antidepressant and an antipsychotic, but she took the medications inconsistently. Although Sharon's family and childhood friends said that she'd never previously shown signs of depression, her Butoh colleagues said that she'd spoken about her struggles with it. She began seeing a psychologist, Eli Levy, who knew her family. It was clear to Levy that finding Butoh had been Sharon's "eureka moment," he said. "I think she believed the dance itself was a release from the ills of society."

When she wasn't dancing, though, she seemed to absorb the world's sorrows too completely. Her friend Tracey-Ann Jarrett-Peña, who knew Sharon from swing dancing, said that, when they discussed acts of police brutality in Egypt, Sharon seemed physically pained; it was as if there were no protective boundary between herself and others. Sharon began to ask Jarrett-Peña, who is black, about her experiences of racism. Jarrett-Peña's husband, Martin Peña, said, "We kept telling her, 'Sharon, you can't feel this guilty for other people's acts of violence.'"

Sharon's acting teacher, Lillian Andron, said that when Sharon visited her she seemed like an "automaton." Andron and her husband, Michael, run a Jewish community theatre in North Miami Beach where Sharon had performed after college. Having directed her for years, they were acquainted with all her facial expressions, but on this visit they didn't recognize her gestures. It was clear to them that Sharon had been reaching for that creative and spiritual space in which "you cross over into a different dimension, and you're not sure if you're playing the instrument or the instrument is playing you," Lillian said. "That's what all of us want. But we hope we do it in a way that is healthy."

Sharon's father demanded that she cut off contact with Kan, but she continued communicating with him. Kan joked, "I will be your personal psychotherapist." He seemed to believe that dancing could be her medicine. He liked to imagine the day, he told me, when ill people might seek help from a choreographer. If a married couple had a crisis in their relationship, he said, "they can go to the choreographer and make a duet," rather than getting divorced. Just as the Sterns supposed that a form of art was the problem, Kan assumed that it could be the solution.

Kan told Sharon that she needed to focus on her recovery and could not perform with him until she was stable. "If you don't want me anymore—on any level, don't feel you owe me anything," she wrote him in an e-mail. "You've given me so much already." In her journal, she wrote that she needed to "accept the inevitable truth that nothing lasts."

But in February, 2012, she went to San Francisco for one of Kan's workshops, though she had not been explicitly invited. She was able to dance for periods of time with intense concentration, but then her focus abruptly broke. Once, she was in the middle of a conversation with Kan when she saw a bus out of the corner of her eye; she ran away and jumped onto it. A dancer at the workshop said that previously she'd had probing conversations with Sharon about trying to push beyond the limits of identity and ego. Now the dancer wondered if Sharon had "gone under the radar, in terms of her deterioration." She noticed that Sharon had "started to talk in faltering English, almost like she was Japanese. My guess is she was merging with Kan."

In e-mails, Sharon began referring to herself in the third person. "What is advice, like used to give to Sharoni," she asked Kan. "I am only trying to find out the 'way' for Sharoni." She envied Japanese dancers who were closer to "the original Butoh essence," she wrote. She began learning Japanese; she told Kan that she was trying to be less expressive and wordy. She found it essential to work on "killing off" "old ways of seeing"—a process she approached with a kind of violence. "It felt like she was frantically running toward it," Lisa Adeva Samoy, a Naropa classmate, said.

Sharon seemed to have a disrupted sense of what is known in philosophical literature as "ipseity"—the taken-for-granted feeling that we inhabit our own experiences. The psychologist Louis Sass, the author of "Madness and Modernism," told me that he has become increasingly attentive to the possibility that meditative and contemplative experiences might have the potential, for some vulnerable people, to foster an erosion of the first-person perspective. Of course, biology and a history of trauma can predispose people to breakdowns, but he believes that certain kinds of meditation can sometimes be a trigger, disembedding people from the social frameworks integral to daily existence. A person becomes unhinged from "the cultural surround—not only from mythic and religious meanings," he writes, "but also from the habits and tacit framework assumptions that normally guide our everyday cognitive activity and ways of behaving." (One of the meditators interviewed in Britton and Lindahl's Varieties of Contemplative Experience project told them that, after reading a paper by Sass about ipseity and schizophrenia, he thought, Fuck, I have schizophrenia.)

In April, 2012, Sharon decided at the last minute to fly alone to Fortaleza, Brazil, for a Butoh workshop, though Kan had urged her not to go without a friend. Once there, she wrote Kan with a question: "Yesterday came up with the idea that butoh is about deconstructing body/ego, etc." She added, "So the question arises what happens AFTER the deconstruction of your body/mind/ego?" Kan responded by telling her that "Butoh is not just simply deconstruction body/ego, etc." He suggested that she revisit the teachings of Hijikata, the co-founder of Butoh, who had described Butoh as "human rehabilitation," a form for protecting oneself from and protesting the alienation of contemporary society.

A week later, Kan learned that Sharon had killed herself in Florida by using a helium kit. At first, Kan was convinced that her suicide was merely a rumor. When he finally understood that it was true, he took a vow of silence for forty-nine days, the amount of time, according to some Buddhists, required for the deceased to transition from one life to the next. After Sharon's death, Sheri Brown, the Butoh dancer from Kan's company, said that she revisited notes she had taken while studying with him. "One quote I had written down was 'You must suicide yourself.' I think what he meant was kill your ego. Let go." But, she said, she began to wonder, "Without a guiding star, to what end are we losing the ego? There has to be a path, some rules to hold on to." On social media, the Sterns and some of Sharon's friends accused Kan of being complicit in her death. "Your devotee is gone," Lisa Adeva Samoy wrote on Kan's Facebook page. "Did you take everything she gave?"

In May, 2014, Kan was walking into an arts studio in Bangkok when a man holding a thick manila folder asked for his signature. Kan signed, assuming it was a package delivery. Then the man told him, "This is a complaint against you pending in the Broward County Circuit Court," in Florida.

The complaint had been filed by Tibor Stern, alleging that Kan was the "direct proximate, legal cause of Stern's death." Tibor accused him of "exploiting his superior position as Stern's teacher, by stripping Stern of her free will, under the pretense that such degradation was necessary in order to allow her to attain levels of enlightenment which would allow Stern to become a great Butoh performance artist."

Kan has never been to Florida. At first, he tried to ignore the case. But, he said, other Butoh dancers told him, "You need to fight this. It's not good for the art form."

He hired a lawyer, until he saw the invoice. Then he represented himself. In a motion written with the help of the Butoh dancer Heyward Bracey, he argued that "having a skill which warrants admiration hardly makes one the master of another adult." To challenge Tibor's allegations, he compiled hundreds of e-mails between him and Sharon, but, not understanding the U.S. court system, he missed deadlines and failed to follow proper procedure for submitting evidence. At a hearing in 2017, Kan participated by telephone. A Japanese translator was in the courtroom, but he couldn't keep up with Kan. "He's saying a lot," the judge, Mily Rodriguez-Powell, said. "What is he saying?"

Kan said that he wanted to testify, but Rodriguez-Powell told him he would need a notary, to swear him in.

"Right now?" Kan asked.

"Right now," Rodriguez-Powell said. "This is the hearing now."

"Right now it's 1 A.M. in Japan," Kan said. "I'm the only one person in the room."

Kan was not allowed to testify. When he had the chance to cross-examine Tibor Stern, the only question he could come up with was "Why do you lie?"

"Sir, that's not an appropriate question," Rodriguez-Powell told him. "Do you have any practical question concerning this case to ask Mr. Stern?"

He asked Stern why he let Sharon travel to Brazil, shortly before her death. "You are the one who protect her, not me."

"We tried to avoid travelling," Stern said, "but the constant force of his influence on my daughter . . . overcame every effort." He characterized Butoh as a "conception of body and mind, lose your ego, your identity." He added, "It is a cult."

Kan tried to argue that Broward County had no jurisdiction over a Japanese citizen who had never been there. But in April, 2018, Rodriguez-Powell ruled against him, because, she wrote, when Sharon was in Florida Kan had Skyped with her and sent her numerous e-mails "with knowledge that he was interfering with her care." She singled out an e-mail in which Kan had responded to a despairing message from Sharon when she was in Brazil by telling her to "continue her research 'in another world.'" (In fact, in the e-mail, Kan commended her for teaching Brazilian students and said, "Continue your research who you are in another world can be more deep than USA.")

Throughout the case, Kan rejected Tibor's characterization of Butoh as a dance that teaches people to "wallow in the darkness of their soul." He explained that darkness has different connotations in Japan than it does in Judeo-Christian traditions, in which darkness is equated with sin. His definition of dark, he said, was "nobody knows yet." William Marotti, a professor of modern Japanese history at U.C.L.A., said that, in the context of postmodern Japanese art, references to darkness should be understood as part of an "argument about art and the state." He went on, "Art is in a zone of darkness and indeterminacy, and then there is light, which is basically the government: prosecutors, police, bureaucrats. They try to nail down and define the creative unknown and in that process kill it."

Wrongful-death cases often turn into a battle between experts, and Kan didn't have the money to challenge the testimony of Tibor's expert, Eli Levy, the psychologist who treated Sharon before she died. Levy, who had seen Sharon for fourteen sessions, acknowledged that, initially, Kan had helped her to "believe in herself, to express herself . . . to see how beautiful she was in the inside and outside." But, over time, he said, Sharon "essentially stopped being who she was and became a full imitation of what he wanted her to be."

In March, 2019, after Tibor filed a motion for partial summary judgment, there was a final hearing. For fourteen minutes, Kan said, he repeatedly called the number for the court—he had evidence from other Butoh dancers that he intended to present—but no one picked up. When he eventually got through, the hearing was over and the ruling had already been made: Kan was liable for the suicide of his student. (Tibor Stern decided not to pursue damages. "He doesn't have a dollar to his name," he said.) Kan told me that the ruling showed that "the court doesn't understand avant-garde art—the judge believes that art must be in pursuit of something beautiful." But, he said, "an artist is looking for the next day's beauty, not this day's beauty."

Bracey, the Butoh dancer who helped Kan draft his responses to the lawsuit, characterized the case as "this strange male power struggle between one patriarch, Sharoni's father, and another patriarch, Kan. Sharoni, the person, was never really acknowledged in that space."

Historically, suicide has been one of the few kinds of death for which someone else cannot be blamed. It didn't matter what provoked a person's despair—committing suicide was seen as a crime, a self-contained and autonomous decision that eclipsed whatever wrongful acts had led to it. The suicidal person was guilty of "invading the prerogative of the Almighty, and rushing into his immediate presence uncalled for," the eighteenth-century English jurist Sir William Blackstone wrote. Carried into the American colonies, this view of suicide has had a lingering influence on U.S. law. As late as the nineteen-sixties, several states listed suicide as a crime.

In recent years, though, courts have begun accepting that people are more interconnected than the laws surrounding suicide acknowledge. In 2017, Michelle Carter, a Massachusetts woman, was convicted of involuntary manslaughter for sending text messages and making a phone call to her boyfriend urging him to kill himself; not long afterward, a Boston College student was indicted for the same crime, because prosecutors said she sent her boyfriend abusive text messages that prompted his suicide. Criminal courts are increasingly willing to see suicide as a kind of social process, and the suicidal person as a victim. Civil courts, too, have been taking more seriously the argument that people in positions of power—prison and school officials, psychiatrists, coercive partners—can be responsible for the deaths of those who need guidance or protection. The impulse to commit suicide does not always manifest like a germ in the body—it can also be shaped by teachers, by belief systems, by communities.

The writer Andrew Solomon observes that the catastrophe of suicide is "not only the loss of someone, but the loss of the chance to persuade that person to act differently, the loss of the chance to connect." The lawsuit against Kan took that loss and enlarged it into a kind of evil fairy tale. Tibor Stern has

"How much farther away from it all will we be going?"

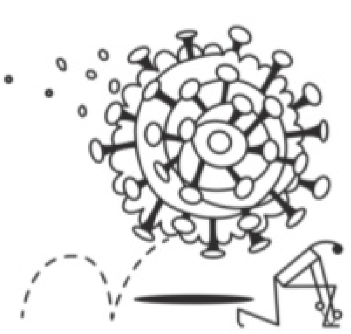
founded an organization called Families Against Cult Teachings (FACT), which he runs out of a one-story brick office building near the Sterns' house. Whenever Kan is invited to perform somewhere, Stern e-mails the organizers of the event saying that Kan killed his daughter. "I never thought that it was possible to lose a child to a hostile outside force like this," he told me. But mental illness can look like a hostile outside force, too. Brainwashing may be a fitting metaphor for what it feels like to become profoundly depressed.

In the past two decades, the suicide rate in America has increased by thirty-three per cent—the rate is the highest since the Second World War—but there have been few advances in understanding how to prevent this sort of death. A review of forty years of studies in the journal *PLOS One*, in 2016, concluded that a reliable method of identifying who might commit suicide "remains elusive." Ninety-five per cent of people who had been identified in studies as most likely to kill themselves did not do so. Half of the people who committed suicide had been classified as low risk. The authors wrote, "The extent of this uncertainty is profound." In "The Savage God," a book about suicide, the English writer A. Alvarez observed that explanations for suicide are almost never sufficient. They are "like a trivial border incident which triggers off a major war. The real motives which impel a man to take his own life are elsewhere; they belong to the internal world, devious, contradictory, labyrinthine."

Perhaps it is a category error to place the burden of solving suicide on psychiatry; the wish to end one's life can be as much a spiritual, social, or existential crisis as a medical one. The study of suicide is still defined, to a great degree, by the sociologist Émile Durkheim, who argued, in "Suicide," from 1897, that the most prevalent type of suicide in Western society was "anomic suicide"—a response to social upheavals that caused people to become disconnected from their community's values and norms. Their desires and aspirations go unchecked, and they suffer from "overweening ambition," creating a state of perpetual dissatisfaction. "Inextinguishable thirst is constantly renewed torture," Durkheim wrote. Durkheim's insight is perhaps not so far from the Buddha's teaching that our striving is the cause of suffering.

Kan's career in the United States appears to be over. FACT was so successful in its campaign against him that he is rarely invited to perform in American theatres and schools. He still travels to other parts of the world, but the accusations trail him. "This Butoh 'teacher' uses his position for his own personal selfish gain and pleasure," Tibor wrote to a performance space in Kyoto, in 2018. "It is incumbent upon your company to terminate any involvement with Katsura Kan," a "support specialist" from FACT wrote to the directors of a venue in Finland. When the director of a performance space in Cuernavaca, Mexico, didn't respond to messages, in 2017, another FACT representative wrote, "If we don't hear from you soon, we will be contacting the ministry and all related gov agencies." In most of its correspondence, FACT attached two anonymous "victim letters," as they were titled, from Butoh dancers. But the letters were vague. One described the difficulty of finding trustworthy mentors. The other referred to Kan as a monster and said she identified with Sharon: "We both desired the same thing. Creative fulfillment."

Vangeline, the founder of the New York Butoh Institute, said that after Sharon's death she reëxamined encounters earlier in her career. She'd studied with a Butoh master who "dispensed personal and spiritual advice as though he were an authority on the subject of life itself," she wrote in an essay on her Web site. At the time, she interpreted her resistance to him as a personal failure. But, she told me, "Kan was not one of those teachers whom I felt was posing as a spiritual master. I personally never saw that behavior with him." In an affidavit submitted to the Broward County court, in 2018, she had characterized Tibor Stern's attacks on Kan as a "modern-day witch hunt" that preyed on "prejudices and fear of the unknown."



Nathan Montgomery, a Butoh teacher with whom Sharon studied in Boulder, said that her death, and the family's response, contributed to his decision to leave Boulder and to take a break from teaching Butoh. "It stopped me in my tracks," he said. "If I guide people into dark new places that they hadn't explored before—which is a big part of the work that I do—what is my responsibility as a teacher?" He wondered "whether Japanese Butoh can ever really even happen in a Western body," he said. "As dancers, we physically redefine ourselves through our teachers, but what's tricky is when we take on a form that is so deeply rooted in a different cultural tradition, and the narrative is not our narrative."

Butoh is easy to scapegoat: it explores the "very roots of anguish," as a French critic once put it. But a few dancers thought that Sharon would have deteriorated no matter what genre of dance she had chosen. "Have you seen 'Black Swan'?" a Butoh dancer asked me. The heroine, a ballerina with a feverish level of ambition, inhabits her role too deeply and has a nervous breakdown. (Tibor Stern, too, occasionally invoked the themes of "Black Swan." "I don't blame you," he wrote Sharon a few months before she died. "You just wanted to dance to perfection.")

When I spoke with Kathryn Ross, Sharon's friend from Naropa, she remarked that she was staring at a small gold enamelled treasure box that Sharon had given her. A few days earlier, when I first e-mailed Ross, she had realized that she was wearing Sharon's red hooded wool coat. It occurred to her that for years Sharon had been giving away her belongings—a warning sign of suicide.

Ross wishes that Sharon had had a more nurturing mentor who could have reminded her, "As part of this Butoh process, you are questioning everything about yourself, but remember that you need some basic sense of self." She wondered if Sharon would have taken a different path had she devoted herself to Barbara Dilley, her thesis adviser, rather than Kan. Dilley told me she recommends that "students hang out on the outskirts of a practice or devotional community for five or ten years and really observe what is going on before they commit to becoming a student." Ross remembers Dilley instructing her students to walk across the room carrying water in silver spoons, to help them internalize the Buddhist concept "not too tight, not too loose." Ross interpreted the lesson as "If you are grasping something too tightly, you will destroy it."

The first time Kan and I spoke, on Skype, he told me, "I'm not expecting only good things about me. You can criticize me. Just make good work." He spent hours systematically forwarding me the contents of his Yahoo in-box. I asked him by e-mail if he'd come closer to understanding the reasons for Sharon's death, and he wrote me, "I reply your answer took more than 6 hours as my English is not skillful" and enclosed a numbered list of possible reasons for her suicide, including her fasting, the collapse of her marriage, and the death of her dog—a car ran over the dog three weeks before Sharon died. He did not shy away from pointing out Sharon's weaknesses. "One side of Sharoni is too egoistic," he told me, adding that Sharon struggled as she tried to distance herself from a family that was "attracted to the diamond."

When I asked him if he regretted crossing professional boundaries with her, the language barrier felt insurmountable; he had trouble with the word "boundary," interpreting it in terms of movement and the importance of pushing one's body and mind to the edge and beyond. He also said, "In a sense I love her," adding that "she's a very lovely woman, and she's very attractive, and she has a very nice instinct for creation." But he explained that he usually had a few disciples at a time and shared this kind of intimacy with all of them. "In Japan the teaching style is face to face, hand to hand," he told me. He had discouraged Sharon from separating from Todd, he said: "I think he is actually the perfect man."

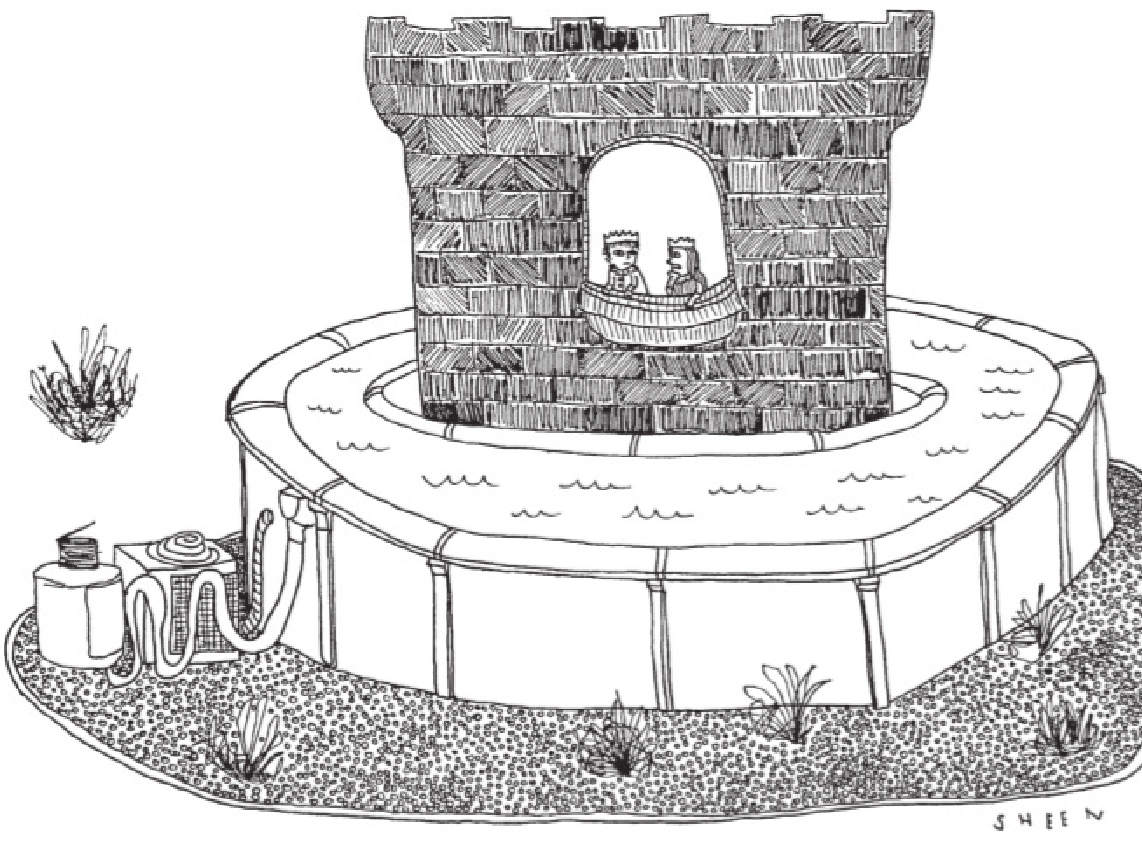
In two different conversations, Kan told the same story, unprompted, about a train conductor in Japan who was so ashamed that his train arrived five minutes late that he killed himself. "This is very much Japanese society," he told me. "It's very tight. Responsibility is very strong." He also told me that when he was a child he had decided to kill himself, after he was caught shoplifting from a store. He pressed a knife to his stomach—but it hurt, so he put the knife down. The way he told stories gave me the sense that there was an important truth to be gleaned, if I thought about his words carefully enough, but after a while I realized that he was more or less cycling through various thoughts he'd had about suicide over the years. He didn't understand, but he was trying to be helpful. There was almost a kind of nobility in his encyclopedic candidness.

He said he wanted to gain more clarity by going to Sharon's grave. He had been avoiding Florida during the court proceedings—visiting the state would undermine his argument that Broward County didn't have jurisdiction over him—but, he told me, "now that I can step in Florida, I want to accuse her, actually. Without permission, how can you suicide? I'm not comfortable. I want to just yell, 'You are an egoist.'"

I asked if he meant for his comment to sound cold. "How can I say, 'Rest in peace,' and give the flowers on the grave?" he responded. "This is acting. I don't like acting." Usually, people suppress their anger, or disguise it in the form of more palatable emotions, but his disregard for social convention appeared to be a point of personal pride as well as an aesthetic value. And yet, when he elaborated on his anger—"It's a very complex emotion, I think," he told me—his tone felt compassionate. "I hope the truth from my heart can reach her," he went on. "Because I couldn't help her. I should have more strongly cared about her. This emotion of anger is not only to her. It is to myself—to myself."

Days before Sharon died, she wrote Kan, "Thank you for all your important lessons, even when they were wrong." She was "escaping," she wrote, and might find more beauty in "another lifetime if it exists at all." Only later, Kan told me, did he realize that she was saying goodbye. "This is my real regret and my sadness," he said. "I regret not being able to notice the loneliness inside of her mind."

Sharon's colleagues worried that her death could prevent young dancers from finding an art form that might be life-affirming for them—an outcome that they felt was in conflict with Sharon's wishes. In some ways, suicide is the antithesis of the lessons she was absorbing: it requires the belief that the present moment, and all the excruciating emotions it contains, is permanent; that the story of one's identity is fixed. "Most stories I create in my mind are untrue," Sharon had once reminded herself in her journal. "Pain can be transmitted instead of obliterated." ♦



"I wish we had an in-ground moat."

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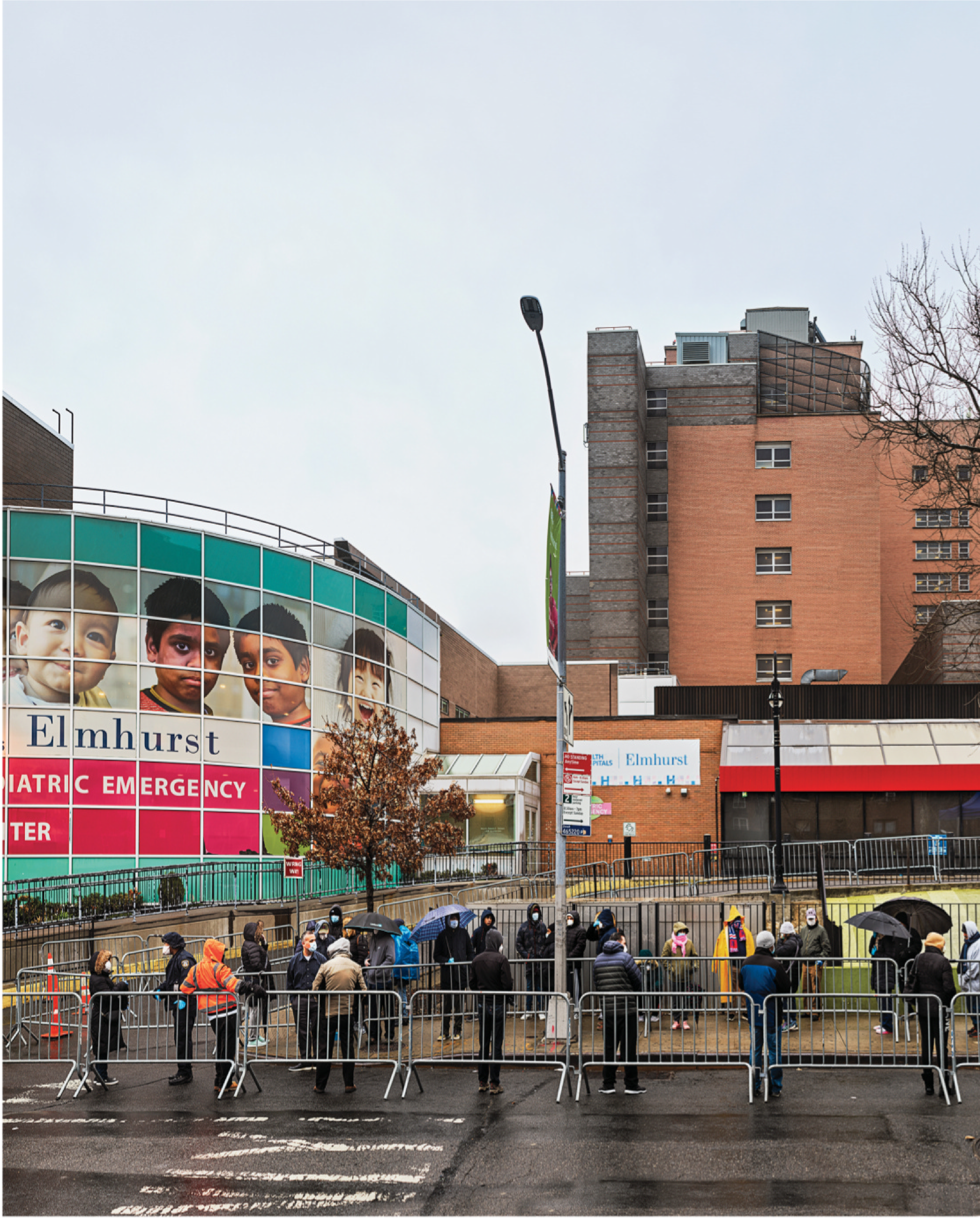
SHOWCASE BY JEFF CHIEN-HSING LIAO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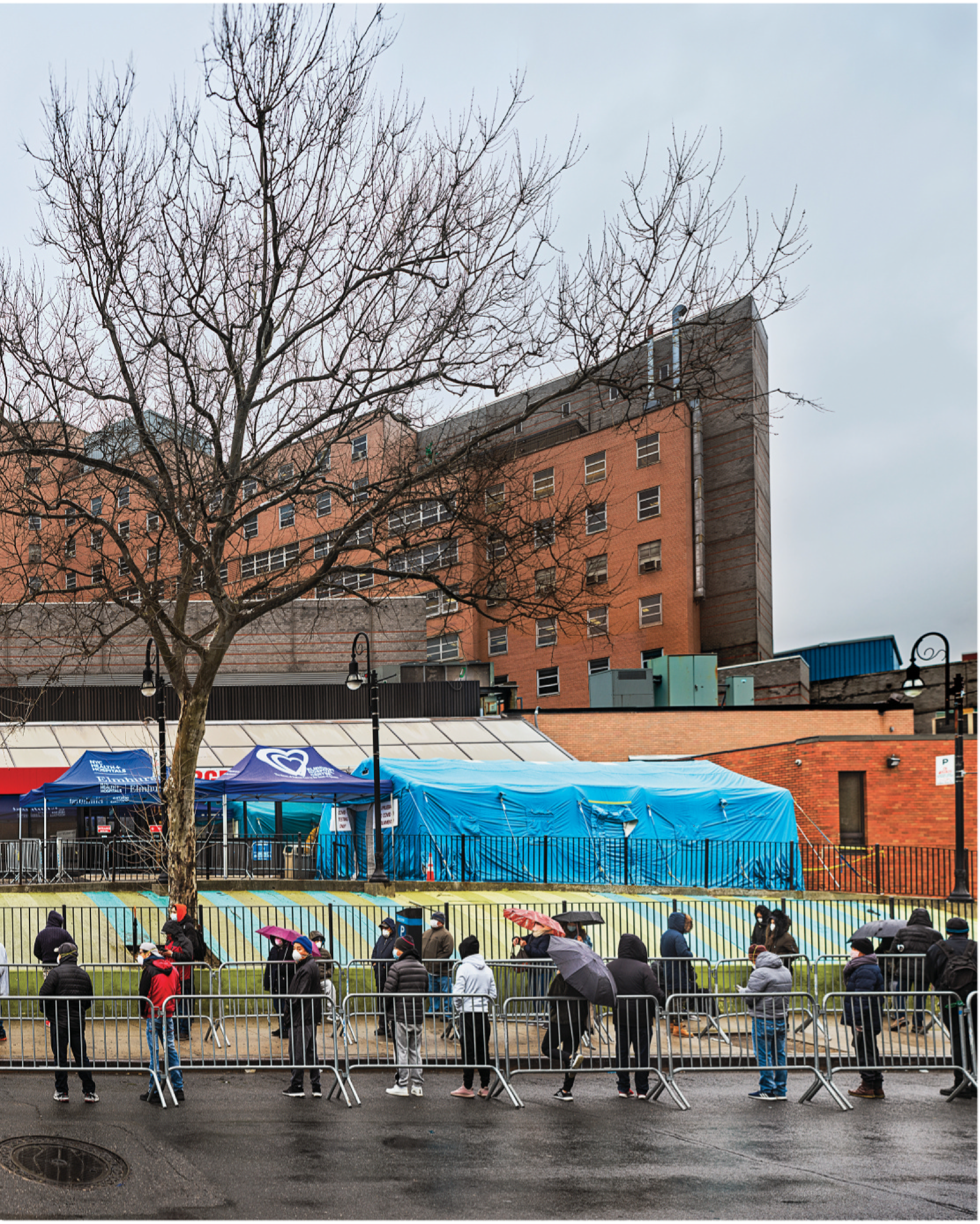
March 23rd: The wait for COVID-19 tests at Elmhurst Hospital. Queens had the most confirmed coronavirus cases of any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borough, and its hospitals are among the most overtaxed in the city.

LETTER FROM YANGQUAN

The Friendship and Love Hospital

As Chinese society transforms itself, can it still care for the dying?

BY JIAYANG FAN

Mu Zhixia discovered the lump in her left breast on an unseasonably warm night in March of 2014. At twenty-seven, she was strong and healthy, and hadn't seen a doctor since giving birth to her son, Xuan, two years before. But her mother, Sulin, told her not to take chances and marched her to their local hospital, in Pingding, a small city in the province of Shanxi. A doctor conducted a swift examination and wrote a prescription. "Doesn't she need a scan?" Sulin asked. "No need!" the doctor responded. "The medication will be enough."

Zhixia dutifully took the pills, but after a few months the lump was still there, so Sulin accompanied her to a hospital in Yangquan, a nearby industrial city of 1.5 million people. The doctors said that she needed immediate surgery. As is typical with dire diagnoses in China, they did not tell Zhixia that she had breast cancer, informing only her mother. Sulin, in turn, assured her daughter that the growth was benign.

After the operation, a biopsy revealed that the cancer had spread. The doctors put Zhixia on a course of chemotherapy, and she was hospitalized for several weeks. A year later, the cancer returned, and the doctor who had prescribed the chemo remarked casually that if they had followed it up with radiation the outcome might have been better. Sulin wanted to know why they hadn't done that, but she felt too intimidated to say anything.

In the next three years, Zhixia had four more long stays in the hospital, emerging frailer each time. The cost of her treatments, a hundred thousand yuan (almost fifteen thousand dollars), plunged the family into financial crisis. The cancer progressed to her lymph nodes, her lungs, her bones. Her body became so ravaged that she was almost unrecognizable. When her son was taken to visit, he had to be prompted to call her Mother.

Shanxi is in the heart of China's coal country, and has disproportionately high rates of esophageal and lung cancer. Zhixia was only five months old when her father, a farmer, died of esophageal cancer. (Sulin remarried, but her second husband succumbed to lung cancer.) Still, Zhixia grew up to be a sunny, optimistic woman. Moonfaced, with high cheekbones, she liked to say that she met her father whenever she looked in the mirror. She quit school after seventh grade and worked various jobs to help support the family. When she was twenty-five, she met her husband, a coal miner named Zhang Wei.

Three years into Zhixia's illness, in the spring of 2017, Wei felt a pain in his back so severe that he couldn't lift up their son. He didn't go to a doctor: caring for Zhixia left little time, and he figured that he'd hurt himself while swimming. Two weeks later, the pain was so bad that he couldn't get out of bed. When he finally went to a doctor, he was informed that he had a blood disorder. The doctor, who suspected late-stage leukemia, told him to check in to the hospital right away. Wei said that he needed to keep working, to pay for his wife's treatment.

Wei died on a brisk fall day, three months later. What pained Zhixia the most was knowing that he had been alone at the end. His mother was too distraught to enter his hospital room, his father had been at work in the coal mines, Zhixia had been receiving another round of chemo, and her own mother was busy caring for Xuan. In the days after, Zhixia told her mother, "Please don't let me die." By then, she knew that

Hospice remains an unfamiliar concept in

China, where there are strong taboos against discussing death and where end-of-life care has long been a family matter.

ILLUSTRATION BY JUN CEN

she had cancer: her father-in-law, who was illiterate, had inadvertently let her see one of her medical reports.

Zhixia's doctors told Sulin to begin thinking about funeral arrangements. In desperation, she started asking around about other medical facilities, and a neighbor told her about a man named Li Youquan, who had opened a small private hospital on the outskirts of Yangquan. Its name was Yangquan You'ai Hospital—*you'ai* means "friendship and love"—and it had a unit devoted to hospice care, a concept still unfamiliar in China.

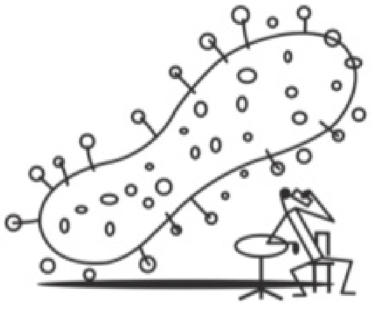
Few cultures relish talking about death, but in China the subject remains taboo. Mentioning it is considered so unlucky that dying people are often reluctant to discuss arrangements with their families or even to make wills. (Last year, "The Farewell," an American film about a Chinese family that uses a wedding as an excuse to gather around a terminally ill grandmother without arousing her suspicions, was a breakout hit in the West, but it was largely ignored in China, where such stories are commonplace.) As a result, fewer than a hundred and fifty institutions specialize in end-of-life care, in a country where nearly twenty per cent of the population—a quarter of a billion people—is sixty or older. The U.S., with some seventy million people over sixty, has more than fifty-five hundred such institutions.

In China, the family has traditionally provided care for the vulnerable: "Raise a child against old age; stockpile grain against famine," one proverb counsels. Confucian expectations of filial piety remain strong, but for most Chinese they have become increasingly difficult to fulfill. Dizzying economic expansion has made China's population ever more mobile, and the one-child policy, in force from 1979 to 2015, means that many adults have no siblings with whom to share the burden of caring for relatives. Hundreds of millions of workers who have moved to the country's booming cities cannot do much more for aging parents back in remote villages than wire whatever money they can spare.

Rural areas also lack adequate public-health services. Close to half the population lives in the countryside, but about eighty per cent of China's medical facilities are concentrated in cities. Health-care costs have risen sharply in recent years, and Chinese patients must navigate a byzantine system of government coverage. Most people have basic insurance, but anything beyond routine care usually requires steep out-of-pocket payments.

The early stages of the coronavirus pandemic brought to light some of the dysfunctions of China's medical system, including underinvestment in primary-care clinics and overreliance on huge, rigidly bureaucratic urban hospitals. But, if the coronavirus exposed the country's health-care challenges in their most acute form, the quieter crisis in end-of-life care reveals a chronic underlying condition, whose symptoms are at once brutally economic and deeply cultural. Prosperity and medical advances have transformed the way Chinese people live, but they have done little to address the question of how they should die.

Li Youquan named the Friendship and Love Hospital for an earlier iteration, which was founded, like most of China's first hospitals, by Western missionaries. American representatives of the Church of the Brethren arrived in the area in 1910, and their hospital trained generations of doctors and nurses. It closed not long before the Communists came to power, in 1949, and expelled foreign missionaries. But, as Li told me when I visited him last summer, almost everything in China runs in cycles: "Sooner or later, what was banned will be reborn."

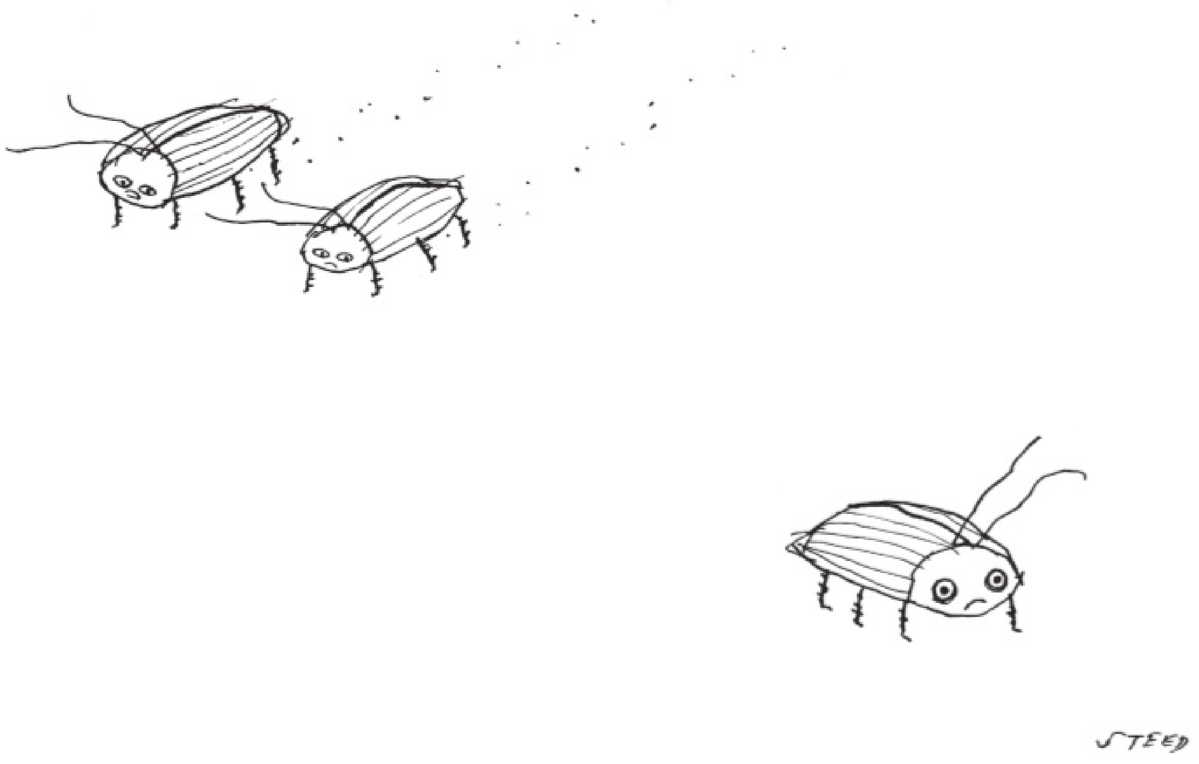


Li is a sturdily built man in his early fifties, with alert eyes set in a frank, expressive face, and he comes from a family of farmers. His route to providing palliative care was a circuitous one. In the late eighties, he attended a vocational school that specialized in traditional Chinese medicine. After graduating, he left traditional medicine behind and did an internship at the largest hospital in Yangquan, where he encountered an ultrasound machine for the first time, and was amazed. "In Eastern medicine, there is so much interpretation and guesswork," he said. "But with ultrasound you could actually see inside a patient's body." After scraping together enough money to buy a machine, he started operating a clinic out of his house, near the village where he was born. Charging a couple of dollars per scan, he found that there was good money to be made detecting tumors and pregnancies.

At the time, in the early nineties, Deng Xiaoping's market reforms had been opening state-run services to private enterprise. The Communists had established near-universal health care, which, though often rudimentary, increased the average life expectancy from thirty-five, in 1949, to sixty-nine, in 1990. Under the economic reforms, however, hospitals were allowed to ramp up what they charged for their services, and government health-care spending shrank. The process was anything but linear—during a crackdown on unlicensed operators, Li's clinic was closed and his machine confiscated—but the burden of cost continued to shift toward patients, and the gap between standards of care in the cities and those in the hinterlands widened.

Li spent the next decade working at state clinics, until, in 2005, he saw another chance to launch an entrepreneurial venture. In the aftermath of the SARS epidemic, the government embarked on the country's most ambitious health-care reforms in more than a generation, in part to address the rural-urban divide. Li built the Friendship and Love Hospital on a plot of undeveloped land next to his home. Initially, there were only twenty beds. "I knew I wanted to offer something that other, bigger hospitals didn't," Li told me. "But I hadn't really figured out what that was." Still, the business thrived, and, five years later, in 2010, he decided to hold a celebration for the centennial of his hospital's missionary namesake. It had occurred to him that publicizing the institution's American roots might attract investment and expertise from the U.S. The thought prompted him to send e-mails to various organizations associated with missionary work.

One of these e-mails reached Li Ruoxia, a recent graduate of a Lutheran seminary in Dubuque, Iowa. She was struck by the coincidences: she, too, was from the Yangquan area; she had written a master's thesis on the heritage of Christian communities in Shanxi; and her husband, an American anthropologist, had written his doctoral thesis on the rituals of aging and filial piety in rural China. Ruoxia had been volunteering at a nursing home in Iowa—she later worked at a hospice—and, as she corresponded with Li Youquan, she started to think about the lack of such services back home. "To die seems so private, but the process is embedded in a larger system," she told me. In China, death was met first with denial and then with stoicism. "But in a hospice death is accepted, so its trauma is slightly eased," she said. In 2012, she and her husband moved to Yangquan, so that she could introduce hospice care to Li's hospital.



"He survived nuclear Armageddon. But he doesn't like to talk about it."

At Friendship and Love, Ruoxia began hiring a team to act as social workers, both for the hospital's resident patients and for discharged patients facing their final days at home. She led workshops on family support and bereavement counselling, and handed out translations of American writing on the subjects. Sometimes she asked team members to write letters to themselves or their loved ones to practice communicating difficult emotions. Her recruits were women from the countryside, most of whom had first come to the hospital to care for dying relatives. Few of them had finished high school, but they could do simple health-aide tasks and instruct patients and families on the importance of hygiene. Just as important, the women understood the people they helped. They spoke the same dialect, shared the same outlook, knew the local customs, and had an intuitive sense of how best to broach the subject of dying.

One of the first team members was Liu Meiying, a cancer survivor in her early sixties. After receiving her diagnosis, more than twenty years ago, she'd quit her job at a factory and joined a fledgling patient-support group in Yangquan. The group, known as the South Mountain Anti-Cancer Club, offered support that was rare at the time, arranging outings and gatherings where members could talk about treatment options and the day-to-day impact of their illness. "Back then, no one had ever heard of the word 'hospice,'" Meiying said. "But, with our regular visits to our dying members, that's what we were trying to do, in our clumsy way."

Ruoxia's hospice unit was unusual enough to seem suspect to conservatively minded people. Early on, when the hospital registered with Shanxi's Civil Affairs Bureau, the officials were particularly concerned about what the unit would be called, and Ruoxia had to come up with a name that was suitably euphemistic. She knew that phrases like "hospice care" and "palliative care" wouldn't do, but even "comfort care" was judged to hint too aggressively at a failure of treatment. Eventually, the government settled on Elder Navigation Center. "The bureaucrats don't even know sometimes why they are so resistant to try new things," Ruoxia told me with a bitter laugh. "Usually, they just know it's safer."

By the time Zhixia arrived at Friendship and Love, last April, cancerous growths were compressing her spine to the point where she could no longer feel the lower half of her body. She experienced severe nausea—even spoonfuls of porridge were hard to keep down—and had lost so much weight that her emaciated frame seemed lost in the hospital's striped pajamas. Pain from ulcers in her mouth kept her from sleeping. Sometimes, early in the morning, she became delirious, and thought that she heard ghosts on the other side of the wall. Still, she had no thought of giving up. "Why aren't they treating the source of my illness?" she fumed to her mother when her doctors focussed on her bedsores. "They should be trying to fix that first!"

After Zhixia's experiences in other hospitals, the work of Ruoxia's team seemed strange to her. She was perplexed that the social workers talked so much about her feelings rather than about her disease. But their unusual methods were not always unwelcome. Instead of examining her, Ruoxia offered to wash her hair, and, when Ruoxia mentioned her young daughter, Zhixia took out her phone to show off pictures of her son. When Ruoxia arrived bearing nutritional shakes and cartons of yogurt, Zhixia suggested, with a weak smile, that perhaps her mother could eat them: "Her belly is my belly, her heart my heart."

One morning, a few days into Zhixia's stay, Meiying got a text message from her: "Auntie. Urgent! I need to talk to you!" When Meiying saw the time stamp on the message—4 A.M.—she feared the worst and rushed over to the hospital. "Are you feeling O.K.?" she asked breathlessly when she got there. But Zhixia seemed better than usual and greeted her with a bright smile.

Sulin was in the room, too, fussing

over her daughter. As soon as Sulin left, to get some breakfast in the cafeteria, Zhixia lowered her voice and said, "Can you help me with a task, big sister?" She told Meiying about something that she'd just read on her phone. Constantly thinking about how she might rescue her family from the financial hole into which her illness had sunk them, she'd come across a government-assistance scheme that claimed to help those in dire need. She wanted Meiying to help her apply. "My mom is strong, but I don't think she realizes how impossible our money situation will be," Zhixia confided.

Meiying nodded and promised to do her best. She was happy to help, and felt satisfaction that Zhixia was opening up more and more to her and the other aides. On the way out, Meiying ran into Sulin, her eyes puffy and red-rimmed. She hadn't gone to breakfast after all but was just waiting there in the corridor, unable to leave her daughter. When Sulin moved to go back in, Meiying put a hand gently on her shoulder and told her that it would do her good to get some breakfast. "I'll stay with Zhixia for as long as you need," she said.

SHELTER

Don't misunderstand me, I love a good poem
Like half my Facebook friends, one that transports you
To a corner of the soul you didn't know was there
Because you couldn't find the precise metaphor,
Even if you felt it, like that time my parents saw
A local news story of an older woman asking for help
With an ailing husband, and I volunteered to drive them
To the address onscreen, a neighborhood
I'd never driven through, though it looked familiar
With its usual poverty: a few leaning boards called a house
And inside the woman from the news in half-light
Thanking us for the comforters in our hands and pointing
To a foldout chair where we could place them
Before introducing us to her husband, a scraggly beard
Beneath a crinkled blanket on a cot right there
In what would have been the living room, groaning
In the muted manner of those who know this is
As good as it'll get, the woman's non-stop small talk
About "So it is, life's a struggle" and "Please stay awhile"
And "Take a seat," as if we were long-missed relatives,
All this in Spanish, though I translate it here
Because I want to reach the widest audience
And not burden the monolingual English reader
When they've already gifted me their time by reading this,
Which I'll call a poem, one that my parents can't read,
As they only speak Spanish with that poor Mexican lilt of apology
Which kept them from interrupting the woman, a Spanish

Early one morning last June, I accompanied Meiying on a visit to a patient everyone called Brother Zhang, who suffered from advanced cirrhosis of the liver. Brother Zhang lived in a remote part of the countryside where his family had farmed corn for generations. As we drove north out of Yangquan, the industrial cityscape gave way to squat, sagging houses of weathered brick. Brown-gold cliffs composed of Shanxi's distinctive sandy loess soil punctuated fields of millet and sorghum. An hour later, we got out of the car and walked the last mile, up a hilly dirt path and then on broken stone steps enmeshed in roots. Brother Zhang's house was what is known in the region as a *yaodong*, or cave home—a courtyard arrangement of vaulted rooms carved into the loess hillside.

Zhang, a lean stalk of a man with a hawkish, wind-parched face, came out to greet us. Though his gait was sometimes unsteady, he moved about the premises quickly, showing me his well, a giant millstone, a barn where he'd once kept donkeys, and herbs and peppers hanging to dry under the lintel of a doorway. "It means something when city folk visit them," Meiying murmured. Zhang boasted that he could still haul a respectable amount of corn on his back. I believed him; he had the wiry strength of a frail person made strong by circumstance.

Zhang lived alone. His wife had left him years ago, and his two sons rarely visited: the older son was a coal miner, with a family of his own; the younger, in his late twenties, suffered from mental illness and usually stayed with relatives. Zhang took us inside the single room that served as his living quarters. The bare stone walls arched overhead, like those of a wine cellar. A bulky old TV set was pushed up against his bed, on which all his earthly possessions were piled. Meiying noticed a pack of cigarettes and playfully chided him, but Zhang said, with a grin, that, at this point, smoking was probably keeping him alive rather than killing him.

When I asked Zhang about his health, he had trouble explaining the details of his condition, something that Meiying told me is common among the people she sees. Until he was in his mid-fifties, he had never stepped inside a hospital, and rarely thought about his body as anything more than a machine from which he needed to extract as much work as possible. But one day, five years ago, he had coughed up enough blood to soak an entire handkerchief. When he visited the First People's Hospital, in Yangquan, he was told that an operation was required, to biopsy a tumor on his spleen. He could not afford it, and, besides, there would be no one to care for him while he recovered. Seeking a second opinion, he ventured to Taiyuan, the provincial capital, but the verdict was the same. In the past three years, Zhang has twice stayed at Friendship and Love to receive intravenous infusions. The second time, he checked himself out early, against his doctor's orders. It was harvest season, and Zhang had no one else to reap his corn.

I noticed a pair of faded calendars, years out of date, hanging above Zhang's bed. One featured the face of President Xi Jinping. The other showed that of

I've kept but rarely use, though I did that moment
When I kept telling my mother "We have to go"
With an almost impolite urgency, because I couldn't bear
One more minute in that near-replica of the room of my childhood,
Even as the woman said "He seems to be in such a hurry"
And my mother smiled, making excuses as we turned to leave,
While I bemoaned my parents' passive politeness
So common in the Mexican in America, though by then
I was already a grad student in upstate New York
And down in South Texas for the winter break
Between semesters of reading Adichie and Alexie
And risking words together to find something
Like the point of this, some search for the reason
For the speaker's love of poems, that pull
Of the written word as artifact, as a kind of tool
Against the sometimes overwhelming sadness about all of it—
Including the fact that some of us it seems will never be allowed
The time and energy to sit with a poem, like them
In that illusion of shelter, though perhaps
They were closer to poetry's pursuit, that edge of oblivion
Where words begin becoming insufficient—the woman
With her frantic speech beseeching us and the man
Extending his bony hand out, as if from the cot itself,
The tremor of it trying to say something that sounded
Like a greeting, that sounded like a plea.

—José Antonio Rodríguez

Jesus. Some Christians had given him the calendar a few years ago, he said, promising that Jesus could save him. Zhang started attending their meetings. "But Jesus did not cure me," he said scornfully, adding that the Christians were no help at all with obtaining medication or I.V. infusions, or with harvesting the crops in his absence. "If neither Jesus nor his followers could do those basic chores, what are they good for?"

Our visit unfolded almost like a social call, but Meiying slipped in questions about the things she'd come to check up on. Zhang admitted that he still had trouble keeping food down. She asked after his younger son, who had recently been threatening suicide. Meiying had done what she could to help, getting in touch with the son on WeChat and telling him not to do anything rash. She advised Zhang to focus on taking care of himself, but his son's problems and other family disputes agitated him. Every so often, he picked up his cigarettes and then, with a glance at Meiying, put them down. The senselessness of suicide, as he desperately clung to life, baffled him. "Life might be short and brutal, but the point is to survive," he said.

At the end of our visit, he gave Meiying a bag of plums that he had picked from his own trees. After we left, Meiying observed that Brother Zhang's case was not unusual. As people moved where the work was, the only people left in the villages were the very old, the very young, and the disabled. Shi Lizhen, the head nurse of the geriatric department at the first hospital Zhang visited, told me that when she started working, more than thirty years ago, elderly patients typically had six or seven children, two or three of whom could devote themselves entirely to their parents' care. Those days were gone, and the hospital's resources were so scarce that they couldn't take inpatients who didn't have around-the-clock caregivers. Some patients hired health aides, but many were too embarrassed to ask their children to help with the cost. Shi, who is fifty-seven, mentioned that her daughter lives in Beijing, seven hundred miles away, and is a mother herself. "When I look at my patients now, immobile in bed, I think about myself and what my future will look like," she said.

One day during my stay in Yangquan, Li Youquan and I drove two hours to Taiyuan, to visit Shanxi Tumor Hospital, the province's largest hospital and one of the first in China to specialize in cancer care. In its vast atrium, amid a sea of red banners bearing socialist slogans, there was a no-smoking sign and a poster warning of the link between smoking and cancer. Nearby, a man sat staring at his phone, a lit cigarette dangling from his mouth. In China, the messages on posters are sometimes a better guide to what is not happening than to what is. Other signs referred to anti-corruption policies and stipulated grave penalties for bribery and profiteering in health-care settings. But, in a dimly lit stairwell, there were phone numbers and notes scribbled on a concrete wall, advertising the services of people who could falsify almost any kind of medical paperwork—patient records, diagnoses, prescriptions, bills.

Shi Lizhen had told me that, in addition to outright corruption, there were many gray areas. Doctors at public hospitals receive paltry remuneration for patient consultations but much more when they order major procedures. As a result, surgeries are suspiciously common. For hospitals, drug sales are an important revenue stream, so overprescription is rife. Shi sometimes encounters patients who are fully recovered but are still being prescribed medication. She discreetly suggests that they ignore their prescriptions, but they usually tell her that they are afraid of offending the doctors. "So we reach a compromise," she said. "The patient buys the medicine, so that the doctor gets paid, but they'll just take it home instead of using it."

In Taiyuan, Li and I went to the Shanxi hospital's residential compound to visit his friend Song Jianguo, the former head of the hospital's respiratory department. Song, who was in his early sixties, had just retired, after having received a diagnosis of Stage IV stomach cancer. Greeting us at the door of his apartment in pajamas and slippers, he explained that he had just finished a round of chemotherapy. He had sharp cheekbones and exuded a placid, scholarly air. In his left nostril was a thin nasogastric tube.

When I apologized for bringing up end-of-life care, Song laughed dryly. "It's a subject we should talk about more openly in this country," he said, pointing out that, even in a hospital of this scale, there was no consistent palliative care. Again, distorted incentives were part of the problem: doctors earned far less for prescribing pain medication than for ordering chemotherapy or surgery. There were cultural factors, too. Many patients in severe pain were wary of opioids, which they associated with addiction, and China's newfound wealth inspired unrealistic expectations. "There's this very optimistic idea that, if we spend enough, diseases will be cured at the rate that new skyscrapers are built and bullet-train tracks are laid," Song said. "But that's not how the human body works." Richer patients couldn't accept that money wouldn't guarantee survival, and those who couldn't afford treatments, he said, "sometimes jump from their window to spare their family the burden of caretaking and the expense."

Song took a shallow, labored breath. He worried that a deepening distrust of doctors was undermining end-of-life discussions: "It's impossible when the patient or the patient's family is thinking at every turn, Oh, is the doctor saying there's nothing we can do because that's really the case or because he doesn't think he'll earn enough to be worth his effort?" Song adjusted his nasal tube. "Everyone should know what's coming. When that day comes, we have to know the difference between giving up and letting go."

One day in May, at Friendship and Love, Zhixia was visited by one of the aides, a woman in her fifties named Cuihe, a former kitchen worker in a restaurant who had come to work in the hospital after her mother had been a patient there. After chatting for a bit, Cuihe read aloud from a book about Mother Teresa. When Cuihe mentioned that she and the others had been reading it in a training workshop, Zhixia said, "I didn't like school, so I don't know very much." Cuihe smiled and said that she hadn't had much schooling, either. After reading a chapter about faith, Cuihe asked Zhixia what she thought the passage was about. "I guess it's about the relationship between a parent and a child, about love and our attitudes to love," she said, and then added, "It's about death, too. I think I will die soon."

Cuihe asked if she was afraid of death. In Zhixia's five years as a cancer patient, no one had ever asked her that. "When the pain overwhelms me, I'm not afraid," Zhixia said. "I just want it to stop so badly that, if death can take away the pain, I almost prefer it." She let out a ragged breath and tried to sit up. "What do you think death is?" Cuihe asked softly. Zhixia thought for a moment and, with Cuihe's help, sipped water through a straw. "I don't know," she responded. "Lately, I've been thinking about time passing, and what time is like after death. When I'm suffering, every second feels like a year." Zhixia tried to smile, but parting her chapped lips made them bleed.

Later, Meiying, who was Zhixia's favorite aide, asked if Zhixia had told her son about her illness. "He knows nothing," Zhixia replied. She said that she'd been taking as many pictures with him as she could, and had organized her and her husband's medical records so that when her son was old enough he could read them. As Zhixia spoke, she started to cry, but muffled her sobs so as not to disturb her mother, who had nodded off in a chair next to her bed. She told Meiying that she'd thought about writing a letter to her son, but worried that she wouldn't be able to express what she felt. "It's O.K. to keep it simple," Meiying said, and suggested that it might be even better to talk to the boy directly. "The way you speak to him is what he will remember years from now."

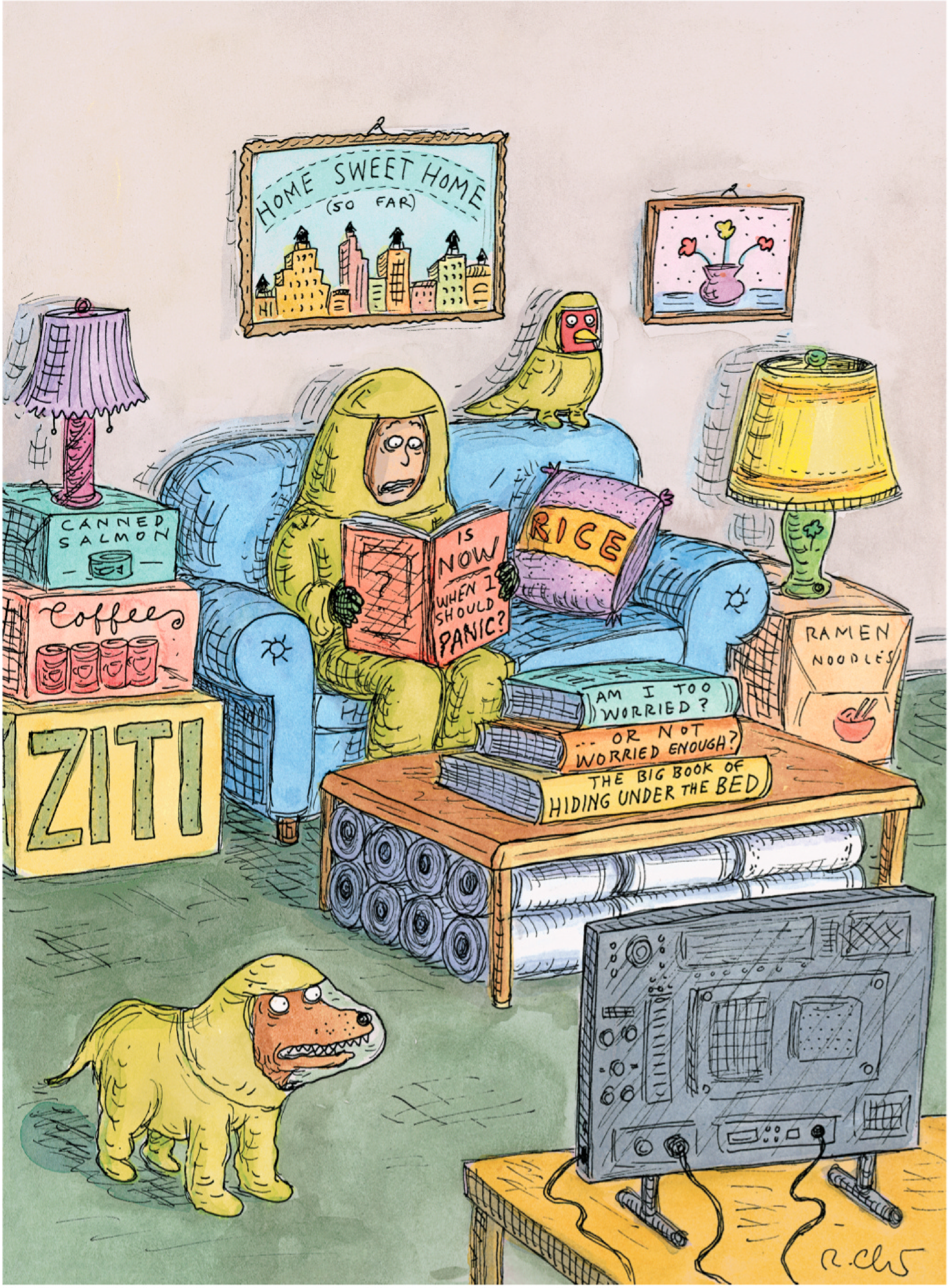
The oldest hospice in China, Songtang Care Hospital, opened in Beijing in 1987. Its founder, Li Songtang, now in his seventies, likes to recount how he came to realize that the dying had needs beyond the merely medical. During the Cultural Revolution, he was sent, as a seventeen-year-old, to Inner Mongolia, to work as one of the "barefoot doctors," whom the Communists dispatched to provide basic care in underdeveloped communities. There he met an exiled professor from Beijing, who was terminally ill with stomach cancer. In the last days of his life, the man became obsessed with clearing his name of the political crimes of which he'd been accused. Li, desperate to give him peace of mind, eventually came up with a lie, saying that he had persuaded authorities to expunge the charges. Li told me that he has never forgotten the way the dying professor grabbed his arm in gratitude. The Party's exoneration, Li realized, was "his only medicine and salvation."

"Dying is not the scary part," Li told me, as we sat in a conference room at the hospital. "It's the uncertainty, the anxiety, of feeling utterly out of control." His facility houses about three hundred patients, and, throughout the years, hospital personnel have visited from all over the country to observe how it functions. The staff's daily check-ins with patients are focussed less on medical requirements than on soothing anxieties and fostering a sense of connection. When Li showed me around, we came across a late-stage-Alzheimer's patient making her way down a corridor, clutching the railing affixed to a wall. She had to work a substitute factory shift, she explained urgently, because her daughter was out sick. "Your daughter is very lucky to have such an able mother," Li gently replied.

Li noted that, despite Songtang's success, not many places have replicated its model. "Hospice care is not economically prudent," he said. "People who derive the most benefit from it don't live long enough to advocate for it. And the sense of cultural taboo about death deters the living from promoting it." The facility has had to move a dozen times because of complaints from its neighbors; once, protesters who blamed the hospice for bringing a curse on the neighborhood smashed its windows.

An avid collector of antiques, Li proudly pointed out how the hospital building incorporated many pieces of Qing-dynasty architecture. He started salvaging these in the nineties, when Beijing's construction boom indiscriminately razed pagodas and temples. "Chinese society is caught between the old and the new paradigms," Li reflected. "It hasn't decided what it wants to discard and what it wants to import." As he spoke, he took long drags from a cigarette. Smoking was a habit he'd picked up in his teens, to cope with the stresses of

SKETCHBOOK BY ROZ CHAST


HOME SWEET HOME
(SO FAR)
HI
CANNED SALMON
Coffee
ZITI
?
IS NOW WHEN I SHOULD PANIC?
RICE
RAMEN NOODLES
AM I TOO WORRIED?
... OR NOT WORRIED ENOUGH?
THE BIG BOOK OF HIDING UNDER THE BED

SOFIA WARREN

"We met in Purgatory, and I think we're going to try to make it work long distance."

• •

being a barefoot doctor, but he told me that he wasn't worried about cancer. "We all carry cancer within us," he said. "It's relentless checkups at predatory hospitals that actually kill you."

I toured a number of other upscale facilities in Beijing and began to wonder how my mother, back in New York, would fare in such places. For almost a decade, she has suffered from A.L.S., the fatal neurodegenerative disease that causes progressive, and eventually total, paralysis. In Beijing, a publicist led me around a facility called Golden Heights—its interior a riot of floral chintz and gilding—and told me that its clientele included the business élite and retired TV stars. There was a gym, a calligraphy room, Ping-Pong tables, a grand piano, and a "nostalgia room" filled with old calendars, enamel basins, and a black-and-white TV from the eighties. A brochure detailed some of the costs: a deposit of a hundred thousand yuan (fifteen thousand dollars) and a room charge that started at ten thousand yuan a month. Standard health aides could be hired for twenty thousand yuan a month, but employing people capable of caring for someone with late-stage A.L.S. would cost much more.

My mother and I had had conversations, while she could still speak, about what was to come. Back in China, she'd been a doctor herself, a pulmonologist in an Army hospital, and she told me that the most unbearable way to die is to be deprived of the ability to breathe. As was customary at the time, she had often told white lies to terminal patients about their true diagnoses and had seen them brought again and again to the E.R. to receive oxygen, only to suffer through their last days in half gasps. So now, at Golden Heights, I raised the subject of do-not-resuscitate orders, explaining to my guide that my mother would prefer comfort care to extraordinary measures. She assured me that if my mother were in crisis she would be taken to the E.R. "But what if she signs a document specifying that she does not want to be resuscitated?" I asked. With an expression of serene forbearance, the woman began shaking her head before I could finish the question. "It's our job to save her life," she insisted, adding, by way of explanation, "Our goal at Golden Heights is to be humane, which means that we will do everything we can to save her."

Under Xi Jinping, the Communist Party has tried to restore the centrality of Confucian thought to national life, including the importance of filial piety. In 2013 it issued the Elderly Rights Law, which threatened legal consequences for children who did not visit their parents. The legislation was met with widespread derision. It was government policy, after all, that had encouraged migration to urban centers, generating unprecedented prosperity but also depriving the elderly of a social safety net. Not for nothing does Confucianism see the faults of a child as reflecting the failures of the parents.

Li Ruoxia, the leader of the hospice unit at Friendship and Love, believes that, these days, an obsession with filial piety usually does more harm than good. "The consideration here isn't necessarily the well-being of the parent but the reputation of the child," she told me. "It's the *performance* of filial piety." It isn't unusual for more money to be spent on elaborate funerals than on making patients comfortable in their final days, and several doctors told me that people often ask them to keep their ailing parents alive for the sake of their retirement checks. Ruoxia's recruits often found themselves in the middle of fraught situations. One man told Meiying about a safe where he kept his life savings. "That made his children and grandchildren very nervous," she recalled. "I told them that if they were gentler with the old man he might not feel like they were just waiting for him to die so they could have his money."

The unit's slogan is "Start the conversation!" because, Ruoxia explained, "in Chinese families, there's sometimes this expectation that, if you really care about someone, you can intuit what they want without them asking." Recently, though, the unit has experienced communication failures of its own. Its members conceived of themselves as a kind of family. "Once I am trusted, I become the go-to person for a family member," Meiying said. "I can't abandon them when I've worked so hard to allow them to let me in." Ruoxia, however, believed that they should be observing clearer boundaries between the professional and the personal. "If their commitment to their job is completely contingent on their feelings about me, how do we, as an organization, grow into something bigger?" she said.

Tensions escalated when Cuihe—who was the designated nutritionist, on account of her restaurant experience—suggested that, instead of preparing patients' meals in the hospital kitchen, it would be easier if she cooked them at home. Ruoxia asked Cuihe to sign a liability waiver making clear that the food's preparation had not been subject to hospital inspection. Cuihe was deeply insulted. "Does she think I'm trying to poison the patients?" she said, relating the story to me months afterward. For Ruoxia, the piece of paper was just a matter of protocol. For Cuihe, it was a sign of personal distrust.

The way that care work distorts boundaries was all too familiar to me. After my mother's diagnosis, I moved her from Connecticut, where she lived alone, to New York, where I worked and lived. I found a two-bedroom apartment in an accessible building and hired home aides to care for her when I was at work. I planned her daily schedule, her meals, her physical therapy, and vacations to places she had always wanted to visit but could not afford.

My therapist told me, "It's like you two are so enmeshed that you share a psychic world." I tried to explain that, though the situation might seem unhealthy, I was fulfilling an important duty. In Chinese, 孝, the character for *xiao*, the Confucian concept of filial piety, is made up of part of the character for "old" above the character for "child," as if the latter were carrying the former. In previous generations, to care for one's parents in their old age was not a choice but a given. My actions were predicated on a Chinese conception that individuals live in the service of the larger, unified entity: the family.

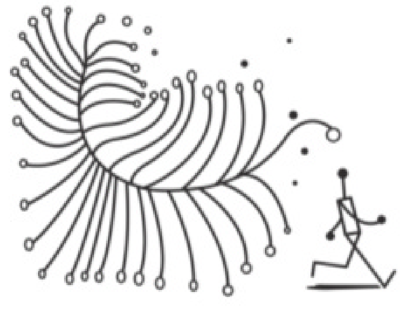
Still, my mother often strenuously protested against my efforts. It was all so much fuss and so expensive, and I think that she didn't want to believe that her decline would come so quickly—preparation made real an eventuality she was still half hoping might not arrive. When I overrode her, I thought of myself not as defying her wishes but as guiding her toward her true desires. To do what she asked rather than what I thought she wanted would have been the real dereliction of duty. It took a long time for me to see that, as her body was gradually robbed of mobility, my wholesale renovation of her life might be depriving her of something that she was just beginning to value at life's end: her autonomy.

I thought of this again when I was at the luxurious Beijing nursing home that could cater to residents' every desire except the desire to one day end their suffering. A paternalistic system of government robs people of the ability to make meaningful choices, infantilizing them to the point where they no longer feel responsible even for the choices that they do make. Sophia Zhang, a gerontologist at Peking University, told me that Chinese doctors are uniquely positioned to see how decades of volatile and violent politics have left their marks on individuals. "People who were very poor in their youth can finally eat to their hearts' content," she said. "To them, three meals of fatty pork and unlimited liquor and no need to do backbreaking labor is the good life. They feel betrayed when I say that they need to curb those appetites."

The idea of dying with dignity is premised on the idea that there is a difference between the quality of life and its length. "That's a profound shift for a generation of people entering their old age, for many of whom life has been just about collective survival," Zhang told me. The ability to take stock of one's life and make choices about its final stage requires the kind of power and responsibility that most Chinese have never had.

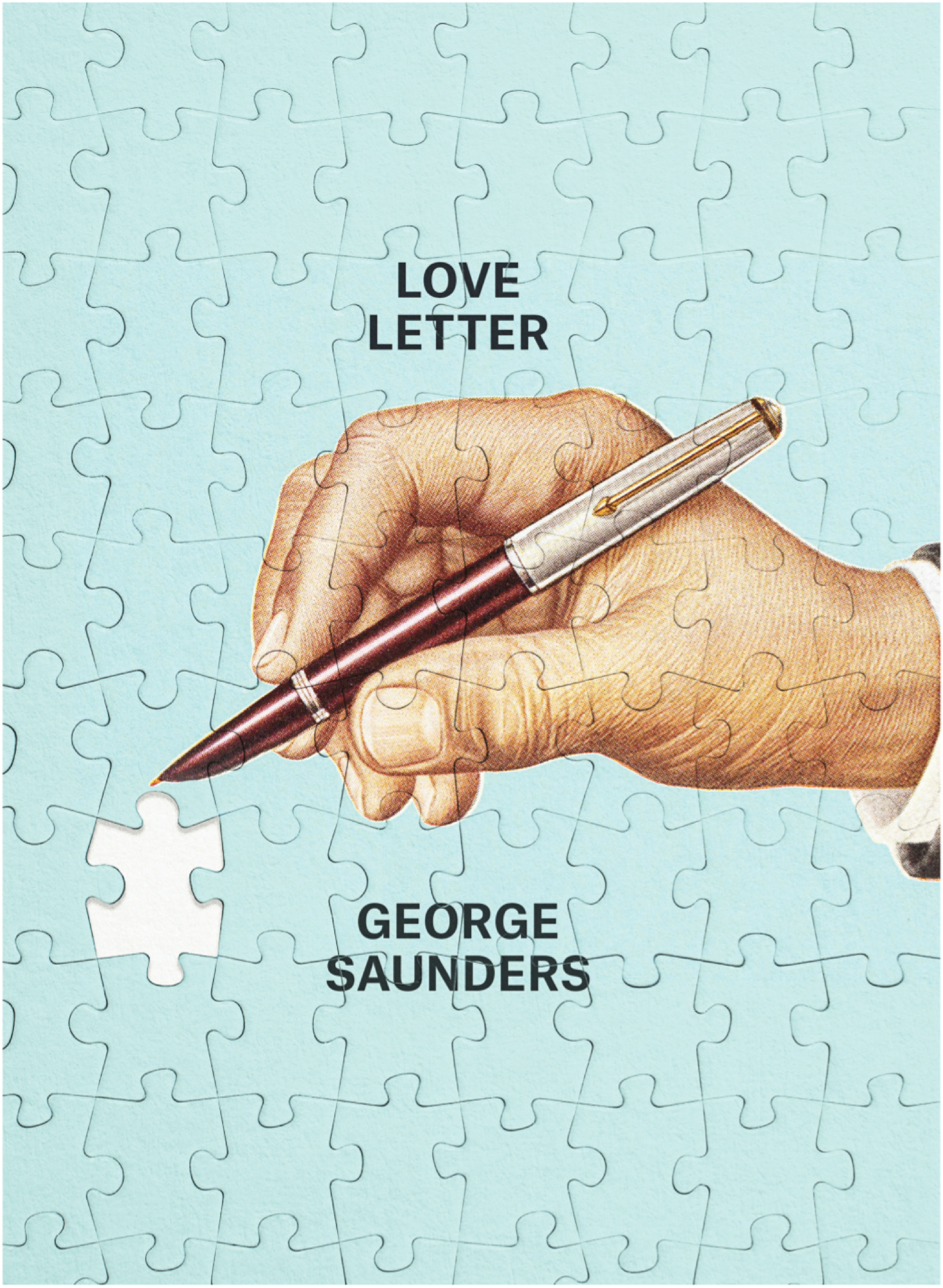
At the beginning of May, Zhixia asked to go home. When I visited her the next month, with Meiying and Cuihe, both of them told me that none of the doctors had expected her to survive more than a week after being discharged. "It says something about the body's desperation to live," Meiying observed quietly.

Zhixia's room was a shrine to her son, its walls plastered with gold-and-red achievement certificates; a table and a dresser were crowded with framed photographs of a boy with Zhixia's wide, high cheeks. When we came in, Zhixia was propped up on cushions, swiping on her phone. Her feet were swollen, and her hip bones protruded sharply from underneath a thick cotton blanket. Sulin, her mother, eagerly reported that, in the past two days, Zhixia had eaten a little more soup than usual. When Meiying asked about her bedsores, Sulin lifted her daughter on her side to reveal a lesion on her back the shade of a darkening banana.



I followed Sulin into the kitchen, where she was preparing scallion pancakes for us and porridge for Zhixia. While we waited for the water to boil, I asked her about her plans for the future. "Zhixia specified that she wants to be cremated rather than buried," she said. "She doesn't want to be bitten by the bugs underground." Her eyes reddened as she spoke, and I gently clarified that I meant her own future: What about her old age? Sulin paused and looked up from the stone floor. She told me that, for the past five years, she had not thought about anything but her daughter. Outside, an old man wandered into the courtyard and squatted down to drink from a faucet. It was Zhixia's father-in-law. "He's half deaf, and his wife passed away not long ago," Sulin told me. "This house is his, or Zhixia and I wouldn't have a place to live. But, if I wasn't here, he wouldn't have a cook. We are a misshapen family—two white-haired parents raising an orphan." She smiled dryly as she said this, but then gave a heaving sob. "I know I've already sewn her funeral clothes, but I don't actually believe she'll die," she said. "I just can't believe it."

Zhixia hung on for seventeen more days. She died on a July morning, with her mother and son by her side. By then, she couldn't recognize them, or speak, swallow, or close her eyes. But the June day when I saw her had been a "good day," according to Sulin. Sunlight was streaming through an open window, and it was possible to imagine a string of summer days stretching on forever. Zhixia wanted only to talk about a math test her son had recently aced, the cucumbers and the tomatoes that had ripened in the yard outside, and a romance novel that she was reading on her phone. Sulin tried to usher us into the kitchen to eat the pancakes while they were still hot, but Zhixia's eyes suddenly flickered wide open. "No, please, don't let me be alone," she said. Everyone stopped, but it was Meiying who climbed onto the bed, bending down close to Zhixia's face. "You are not alone," she said, stroking Zhixia's arm with fingertips so light that they seemed barely to graze skin. "Not for a second." ♦



LOVE LETTER

GEORGE SAUNDERS

ILLUSTRATION BY RODRIGO CORRAL

February 22, 202_.

Dear Robbie,

Got your e-mail, kid. Sorry for handwriting in reply. Not sure e-mailing is the best move, considering the topic, but, of course (you being nearly six foot now, your mother says?), that's up to you, dear, although, you know: strange times.

Beautiful day here. A flock of geese just now came in low over the deck, and your grandmother and I, holding the bright-blue mugs you kindly sent at Christmas, did simultaneous hip swivels as they zinged off toward Rosley and, I expect, an easy meal on the golf course there.

Forgive my use of initials in what follows. Would not wish to cause further difficulties for G., M., or J. (good folks all, we very much enjoyed meeting them when you stopped by last Easter), should this get sidetracked and read by someone other than you.

I think you are right regarding G. That ship has sailed. Best to let that go. M., per your explanation, does not lack proper paperwork but did know, all the while, that G. did lack it, yes? And did nothing about that? Am not suggesting, of course, that she should have. But, putting ourselves into "their" heads—as I think, these days, it is prudent to try to do—we might ask, Why didn't M. (again, according to them, to their way of thinking) do what she "should" have done, by letting someone in authority know about G.? Since being here is "a privilege and not a right." Are we or are we not (as I have grown sick of hearing) "a nation of laws"?

Even as they change the laws constantly to suit their own beliefs!

Believe me, I am as disgusted as you are with all this.

But the world, in my (ancient) experience, sometimes moves off in a certain direction and, having moved, being so large and inscrutable, cannot be recalled to its previous, better state, and so, in this current situation, it behooves us, I would say, to think as they think, as well as we can manage, to avoid as much unpleasantness and future harm as possible.

But, of course, you were writing, really, to ask about J. Yes, am still in touch with the lawyer you mentioned. Don't feel he would be much help. At this point. In his prime, he was, yes, a prince of a guy striding into a courthouse, but he is not now the man he was. He opposed, perhaps too energetically, the D.O.J. review/ouster of sitting judges and endured much abuse in the press and his property was defaced and he was briefly detained and these days, from what I have heard, is mostly just puttering around his yard, keeping his views to himself.

Where is J. now? Do you know? State facility or fed? That may matter. I expect "they" (loyalists) would (with the power of the courts now behind them) say that although J. is a citizen, she forfeited certain rights and privileges by declining to offer the requested info on G. & M. You may recall R. & K., friends of ours, who gave you, for your fifth (sixth?) birthday, that bronze Lincoln bank? They are loyalists, still in touch, and that is the sort of logic they follow. A guy over in Bremerton befriended a guy at the gym and they would go on runs together and so forth, and the first guy, after declining to comment on what he knew of his friend's voting past, suddenly found he could no longer register his work vehicle (he was a florist, so this proved problematic). R. & K.'s take on this: a person is "no patriot" if he refuses to answer a "simple question" from his "own homeland government."

That is where we find ourselves.

You asked if you are supposed to stand by and watch your friend's life be ruined.

Two answers: one as a citizen, the other as a grandfather.

(You have turned to me in what must be a difficult time and I am trying to be frank.)

As a citizen: I can, of course, understand why a young (intelligent, good-looking) person (perpetual delight to know, I might add) would feel that it is his duty to "do something" on behalf of his friend J.

But what, exactly?

That is the question.

When you reach a certain age, you see that time is all we have. By which I mean, moments like those overhead geese this morning, and watching your mother be born, and sitting at the dining-room table here waiting for the phone to ring and announce that a certain baby (you) had been born, or that day when all of us hiked out at Point Lobos. Those baby deer, the extremely loud seal, your sister's scarf drifting down, down to that black, briny boulder, the replacement you so generously bought her in Monterey, how pleased you made her with your kindness. Those things were real. That is what (that is all) one gets. This other stuff is real only to the extent that it interferes with those moments.

Now, you may say (I can hear you saying it and see the look on your face as you do) that this incident with J. *is* an interference. I respect that. But, as your grandfather, I beg you not to underestimate the power/danger of this moment. Perhaps I haven't told you this yet: in the early days, I wrote two letters to the editor of the local rag, one overwrought, the other comic. Neither had any effect. Those who agreed with me agreed with me; those who did not remained unpersuaded. After a third attempt was rejected, I found myself pulled over, up near the house, for no reason I could discern. The cop (nice guy, just a kid, really, from my perspective) asked what I did all day. Did I have any hobbies? I said no. He said, Some of us heard you like to type. I sat in my car, looking over at his large, pale arm. His face was the face of a kid. His arm, though, was the arm of a man.

How would you know about that? I said.

Have a good night, sir, he said. Stay off the computer.

Good Lord, his stupidity and bulk there in the darkness, the metallic clanking from his belt area, the palpable certainty he seemed to feel regarding his cause, a cause I cannot begin, even at this late date, to get my head around, or view from within, so to speak.

I do not want you anywhere near, or under the sway of, that sort of person, ever.

I feel here a need to address the last part of your e-mail, which (I want to assure you) did not upset me or "hurt my feelings." No. When you reach my age, and if you are lucky enough to have a grandson like you (stellar), you will know that nothing that that grandson could say could ever hurt your feelings, and, in fact, I am so touched that you thought to write me in your time of need and be so direct and even (I admit it) somewhat rough with me.

Seen in retrospect, yes: I have regrets. There was a certain critical period. I see that now. During that period, your grandmother and I were doing, every night, a jigsaw puzzle each, at that dining-room table I know you know well, we were planning to have the kitchen redone, were in the midst of having the walls out in the yard rebuilt at great expense, I was experiencing the first intimations of the dental issues I know you have heard so much (too much?) about. Every night, as we sat across from each other, doing those puzzles, from the TV in the next room blared this litany of things that had never before happened, that we could never have imagined happening, that were now happening, and the only response from the TV pundits was a wry, satirical smugness that assumed, as we assumed, that those things could and would soon be undone and that all would return to normal—that some adult or adults would arrive, as they had always arrived in the past, to set things right. It did not seem (and please destroy this letter after you have read it) that someone so clownish could disrupt something so noble and time-tested and seemingly strong, that had been with us literally every day of our lives. We had taken, in other words, a profound gift for granted. Did not know the gift was a fluke, a chimera, a wonderful accident of consensus and mutual understanding.

Because this destruction was emanating from such an inept source, who seemed (at that time) merely comically thuggish, who seemed to know so little about what he was disrupting, and because life was going on, and because every day he/they burst through some new gate of propriety, we soon found that no genuine outrage was available to us anymore. If you'll allow me a crude metaphor (as I'm sure you, the King of las Bromas de Fartos, will): a guy comes into a dinner party, takes a dump on the rug in the living room. The guests get all excited, yell in protest. He takes a second dump. The guests feel, Well, yelling didn't help. (While some of them applaud his audacity.) He takes a third dump, on the table, and still no one throws him out. At that point, the sky has become the limit in terms of future dumps.

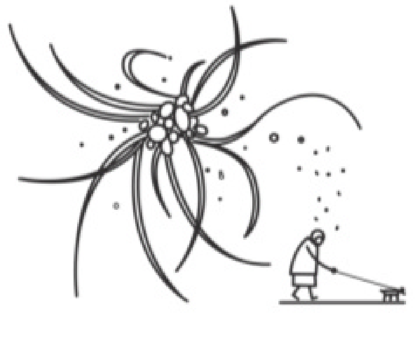
So, although your grandmother and I, during this critical period, often said, you know, "Someone should arrange a march" or "Those f___ing Republican senators," we soon grew weary of hearing ourselves saying those things and, to avoid being old people emptily repeating ourselves, stopped saying those things, and did our puzzles and so forth, waiting for the election.

I'm speaking here of the second, not the third (of the son), which, being a total sham, didn't hurt (surprise) as much.

Post-election, doing new puzzles (mine a difficult sort of Catskills summer scene), noting those early pardons (which, by the time they were granted, we'd been well prepared to expect, and tolerate), and then that deluge of pardons (each making way for the next), and the celebratory verbal nonsense accompanying the pardons (to which, again, we were, by this time, somewhat inured), and the targeting of judges, and the incidents in Reno and Lowell, and the investigations into pundits, and the casting aside of term limits, we still did not really believe in the thing that was happening. Birds still burst out of the trees and so forth.

I feel I am disappointing you.

I just want to say that history, when it arrives, may not look as you expect, based on the reading of history books.

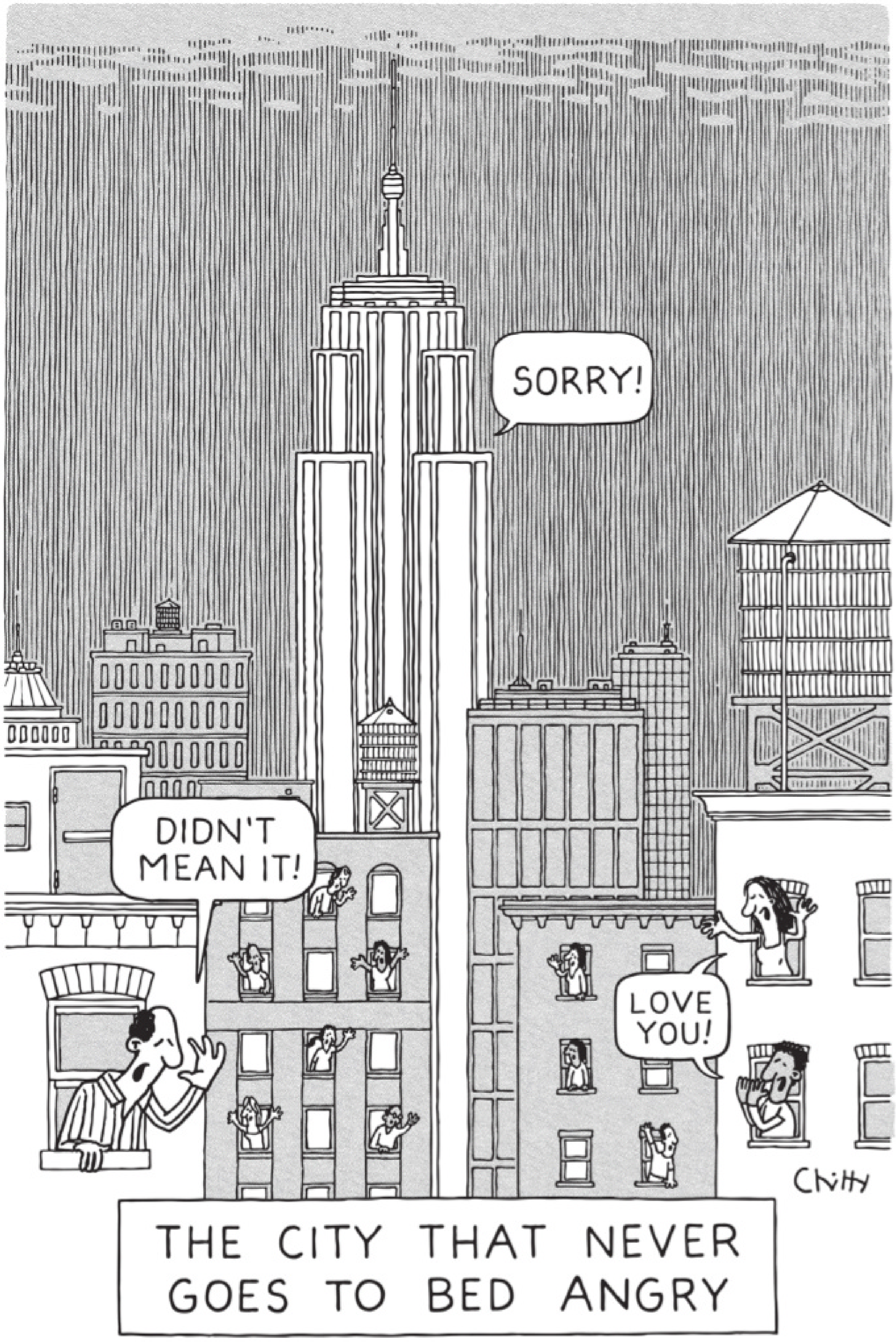


Things in there are always so clear. One knows exactly what one would have done.

Your grandmother and I (and many others) would have had to be more extreme people than we were, during that critical period, to have done whatever it was we should have been doing. And our lives had not prepared us for extremity, to mobilize or to be as focussed and energized as I can see, in retrospect, we would have needed to be. We were not prepared to drop everything in defense of a system that was, to us, like oxygen: used constantly, never noted. We were spoiled, I think I am trying to say. As were those on the other side: willing to tear it all down because they had been so thoroughly nourished by the vacuous plenty in which we all lived, a bountiful condition that allowed people to thrive and opine and swagger around like kings and queens while remaining ignorant of their own history.

What would you have had me do? What would you have done? I know what you will say: you would have fought. But how? How would you have fought? Would you have called your senator? (In those days, you could still, at least, record your feeble message on a senator's answering machine without reprisal, but you might as well have been singing or whistling or passing wind into it for all the good it did.) Well, we did that. We called, we wrote letters. Would you have given money to certain people running for office? We did that as well. Would you have marched? For some reason, there were suddenly no marches. Organized a march? Then and now, I did not and do not know how to arrange a march. I was still working full time. This dental thing had just begun. That rather occupies the mind. You know where we live: would you have had me go down to Waterville and harangue the officials there? They were all in agreement with us. At that time. Would you have armed yourself? I would not and will not, and I do not believe you would, either. I hope not. By that, all is lost.

Let me, at the end, return to the beginning. I advise and implore you: stay out of this business with J. Your involvement will not help (especially if you don't know where they have taken her, fed or state) and may, in fact, hurt. I hope I do not offend if I here use the phrase "empty gesture." Not only would J.'s situation be made worse, so might that of your mother, father, sister, grandmother, grandfather, etc., etc. Part of the complication is that you are not alone in this.


SORRY!
DIDN'T MEAN IT!
LOVE YOU!
Chitty
THE CITY THAT NEVER GOES TO BED ANGRY

I want you well. I want you someday to be an old fart yourself, writing a (too) long letter to a (beloved) grandson. In this world, we speak much of courage and not, I feel, enough about discretion and caution. I know how that will sound to you. Let it be. I have lived this long and have the right.

It occurs to me only now that you and J. may be more than just friends.

That, if the case, would, I know, (must) complicate the matter.

I had, last night, a vivid dream of those days, of that critical, pre-election period. I was sitting across from your grandmother, she at work on her puzzle (puppies and kittens), I on mine (gnomes in trees), and suddenly we saw, in a flash, things as they were, that is, we realized that this was the critical moment. We looked at each other across the table with such freshness, if I may say it that way, such love for each other and for our country, the country in which we had lived our whole lives, the many roads, hills, lakes, malls, byways, villages we had known and moved about and around in so freely.

How precious and dear it all seemed.

Your grandmother stood, with that decisiveness I know you know.

"Let us think of what we must do," she said.

Then I woke. There in bed, I felt, for a brief instant, that it was *that* time again and not *this* time. Lying there, I found myself wondering, for the first time in a long while, not What should I have done? but What might I yet do?

I came back to myself, gradually. It was sad. A sad moment. To be, once again, in a time and place where action was not possible.

I wish with all my heart that we could have passed it on to you intact. I do. That is, now, not to be. That regret I will take to my grave. Wisdom, now, amounts to making such intelligent accommodations as we can. I am not saying stick your head in the sand. J. made a choice. I respect her for it. And yet. No one is calling on you to do anything. You are, in my view, doing much good simply by rising in the morning, being as present and kind as possible, keeping sanity alive in the world, so that, someday, when (if) this thing passes, the country may find its way back to normalcy, with your help and the help of those like you.

In this, you are, and I am, I hope, like cave people, sheltering a small, remaining trace of fire through a dark period.

But please know that I understand how hard it must be to stay silent and inactive if, in fact, J. was more than just a friend. She is a lovely person and I recall her crossing our yard with her particular grace and brio, swinging your car keys on that long silver chain, her dog (Whiskey?) running there beside her.

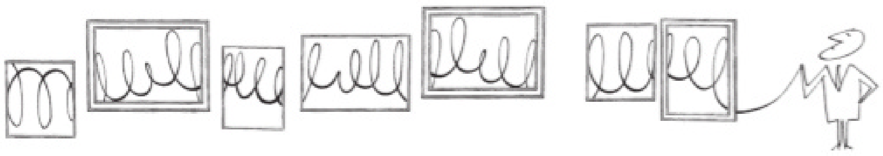
I feel I have made my preference clear, above. I say what follows not to encourage. But: we have money (not much, but some) set aside. Should push come to shove. I am finding it hard to advise you. Please let us know what you are inclined to do, as we find that this (you) is all that we now can think of.

With much love, more than you can know,

GPa. ♦

NEWYORKER.COM
George Saunders on politics and the future.

THE CRITICS



A CRITIC AT LARGE

The Spread

How pandemics shape human history.

BY ELIZABETH KOLBERT

What's often referred to as the first pandemic began in the city of Pelusium, near modern-day Port Said, in northeastern Egypt, in the year 541. According to the historian Procopius, who was alive at the time, the "pestilence" spread both west, toward Alexandria, and east, toward Palestine. Then it kept on going. In his view, it seemed to move almost consciously, "as if fearing lest some corner of the earth might escape it."

The earliest symptom of the pestilence was fever. Often, Procopius observed, this was so mild that it did not "afford any suspicion of danger." But, within a few days, victims developed the classic symptoms of bubonic plague—lumps, or buboes, in their groin and under their arms. The suffering at that point was terrible; some people went into a coma, others into violent delirium. Many vomited blood. Those who attended to the sick "were in a state of constant exhaustion," Procopius noted. "For this reason everybody pitied them no less than the sufferers." No one could predict who was going to perish and who would pull through.

In early 542, the plague struck Constantinople. At that time, the city was the capital of the Eastern Roman Empire, which was led by the Emperor Justinian. A recent assessment calls Justinian "one of the greatest statesmen who ever lived." Another historian describes the first part of his reign—he ruled for almost forty years—as "a flurry of action virtually unparalleled in Roman history." In the fifteen years before the pestilence reached the capital, Justinian codified Roman law, made peace with the Persians, overhauled the Eastern Empire's fiscal administration, and built the Hagia Sophia.

As the plague raged, it fell to Justinian, in Procopius' words, to "make provision for the trouble." The Emperor paid for the bodies of the abandoned and the destitute to be buried. Even so, it was impossible to keep up; the death toll was too high. (Procopius thought it reached more than ten thousand a day, though no one is sure if this is accurate.) John of Ephesus, another contemporary of Justinian's, wrote that "nobody would go out of doors without a tag upon which his name was written," in case he was suddenly stricken. Eventually, bodies were just tossed into fortifications at the edge of the city.

The plague hit the powerless and the powerful alike. Justinian himself contracted it. Among the lucky, he survived. His rule, however, never really recovered. In the years leading up to 542, Justinian's generals had reconquered much of the western part of the Roman Empire from the Goths, the Vandals, and other assorted barbarians. After 542, the Emperor struggled to recruit soldiers and to pay them. The territories that his generals had subdued began to revolt. The plague reached the city of Rome in 543, and seems to have made it all the way to Britain by 544. It broke out again in Constantinople in 558, a third time in 573, and yet again in 586.

The Justinianic plague, as it became known, didn't burn itself out until 750. By that point, there was a new world order. A powerful new religion, Islam, had arisen, and its followers ruled territory that included a great deal of what had been Justinian's empire, along with the Arabian Peninsula. Much of Western Europe, meanwhile, had come under the control of the Franks. Rome had been reduced to about thirty thousand people, roughly the population of present-day Mamaroneck. Was the pestilence partly responsible? If so, history is written not only by men but also by microbes.

Just as there are many ways for microbes to infect a body, there are many ways for epidemics to play out in the body politic. Epidemics can be short-lived or protracted, or, like the Justinianic plague, recurrent. Often, they partner with war; sometimes the pairing favors the aggressor, sometimes the aggressed. Epidemic diseases can become endemic, which is to say constantly present, only to become epidemic again when they're carried to a new region or when conditions change.

To this last category belongs smallpox, dubbed the speckled monster, which may have killed more than a billion people before it was eradicated, in the mid-twentieth century. No one knows exactly where smallpox originated; the virus—part of the genus that includes cowpox, camelpox, and monkeypox—is believed to have first infected humans around the time that people began domesticating animals. Signs of smallpox have been found in Egyptian mummies, including Ramses V, who died in 1157 B.C. The Romans seem to have picked up the pox near present-day Baghdad, when they went to fight one of their many enemies, the Parthians, in 162. The

3.14.47
WHITE SMALLPOX VACCINE
Lot No. 2603W
Diluent No. 84
50% Glycerine

FRITZ GORO / THE LIFE PICTURE COLLECTION / GETTY; OPPOSITE: SERGE BLOCH

Just as there are many ways for microbes to infect a body, there are many ways for epidemics to affect the body politic.

Roman physician Galen reported that those who came down with the new disease suffered a rash that was "ulcerated in most cases and totally dry." (The epidemic is sometimes referred to as the Plague of Galen.) Marcus Aurelius, the last of the so-called Five Good Emperors, who died in 180, may also have been a smallpox victim.

By the fifteenth century, as Joshua S. Loomis reports in "Epidemics: The Impact of Germs and Their Power Over Humanity" (Praeger), smallpox had become endemic throughout Europe and Asia, meaning that most people were probably exposed to it at some point in their lives. Over all, the fatality rate was a terrifying thirty per cent, but among young children it was much higher—more than ninety per cent in some places. Loomis, a professor of biology at East Stroudsburg University, writes that the danger was so grave that "parents would commonly wait to name their children until after they had survived smallpox." Anyone who made it through acquired permanent immunity (though many were left blind or horribly scarred). This dynamic meant that every generation or so there was a major outbreak, as the number of people who had managed to avoid getting infected as children slowly rose. It also meant, as Loomis rather cavalierly observes, that Europeans enjoyed a major advantage as they "began exploring distant lands and interacting with native populations."

Alfred W. Crosby, the historian who coined the phrase "the Columbian Exchange," also coined the term "virgin soil epidemic," defined as one in which "the populations at risk have had no previous contact with the diseases that strike them and are therefore immunologically almost defenseless." The first "virgin soil epidemic" in the Americas—or, to use another one of Crosby's formulations, "the first New World pandemic"—began toward the end of 1518. That year, someone, presumably from Spain, carried smallpox to Hispaniola. This was a quarter of a century after Columbus ran aground on the island, and the native Taíno population had already been much reduced. The speckled monster laid waste to those who remained. Two friars, writing to the King of Spain, Charles I, in early 1519, reported that a third of the island's inhabitants were stricken: "It has pleased Our Lord to bestow a pestilence of smallpox among the said Indians, and it does not cease." From Hispaniola, smallpox spread to Puerto Rico. Within two years, it had reached the Aztec capital of Tenochtitlán, in what's now Mexico City, a development that allowed Hernán Cortés to conquer the capital, in 1521. A Spanish priest wrote, "In many places it happened that everyone in a house died, and, as it was impossible to bury the great number of dead, they pulled down the houses over them." Smallpox seems to have reached the Incan Empire before the Spaniards did; the infection raced from one settlement to the next faster than the conquistadores could travel.

It's impossible to say how many people died in the first New World pandemic, both because the records are sketchy and because Europeans also brought with them so many other "virgin soil" diseases, including measles, typhoid, and diphtheria. In all, the imported microbes probably killed tens of millions of people. "The discovery of America was followed by possibly the greatest demographic disaster in the history of the world," William M. Denevan, a professor emeritus at the University of Wisconsin-Madison, has written. This disaster changed the course of history not just in Europe and the Americas but also in Africa: faced with a labor shortage, the Spanish increasingly turned to the slave trade.

The word "quarantine" comes from the Italian *quaranta*, meaning "forty." As Frank M. Snowden explains in "Epidemics and Society: From the Black Death to the Present" (Yale), the practice of quarantine originated long before people understood what, exactly, they were trying to contain, and the period of forty days was chosen not for medical reasons but for scriptural ones, "as both the Old and New Testaments make multiple references to the number forty in the context of purification: the forty days and forty nights of the flood in Genesis, the forty years of the Israelites wandering in the wilderness . . . and the forty days of Lent."

The earliest formal quarantines were a response to the Black Death, which, between 1347 and 1351, killed something like a third of Europe and ushered in what's become known as the "second plague pandemic." As with the first, the second pandemic worked its havoc fitfully. Plague would spread, then abate, only to flare up again.

During one such flareup, in the fifteenth century, the Venetians erected lazarettos—or isolation wards—on outlying islands, where they forced arriving ships to dock. The Venetians believed that by airing out the ships they were dissipating plague-causing vapors. If the theory was off base, the results were still salubrious; forty days gave the plague time enough to kill infected rats and sailors. Snowden, a professor emeritus at Yale, calls such measures one of the first forms of "institutionalized public health" and argues that they helped legitimatize the "accretion of power" by the modern state.

There's a good deal of debate about why the second pandemic finally ended; one of the last major outbreaks in Europe occurred in Marseille in 1720. But, whether efforts at control were effective or not, they often provoked, as Snowden puts it, "evasion, resistance, and riot." Public-health measures ran up against religion and tradition, as, of course, they still do. The fear of being separated from loved ones prompted many families to conceal cases. And, in fact, those charged with enforcing the rules often had little interest in protecting the public.

Consider the case of cholera. In the ranks of dread diseases, cholera might come in third, after the plague and smallpox. Cholera is caused by a comma-shaped bacterium, *Vibrio cholerae*, and for most of human history it was restricted to the Ganges Delta. Then, in the eighteen-hundreds, steamships and colonialism sent *Vibrio cholerae* travelling. The first cholera pandemic broke out in 1817 near Calcutta. It moved overland to modern-day Thailand and by ship to Oman, whence it was carried down to Zanzibar. The second cholera pandemic began in 1829, once again in India. It wound its way through Russia into Europe and from there to the United States.

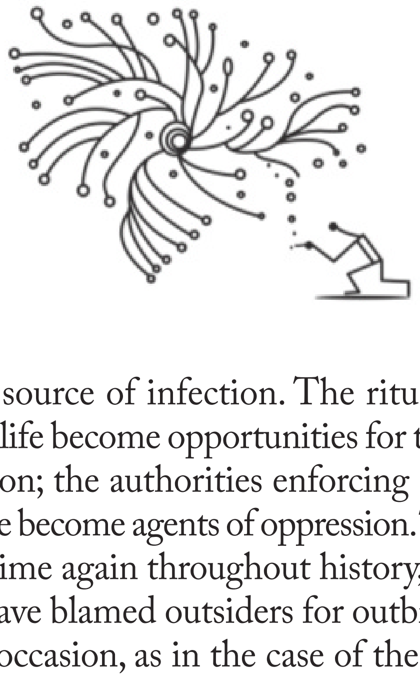
In contrast to plague and smallpox, which made few class distinctions, cholera, which is spread via contaminated food or water, is primarily a disease of urban slums. When the second pandemic struck Russia, Tsar Nicholas I established strict quarantines. These may have slowed the spiral of spread, but they did nothing to help those already infected. The situation, according to Loomis, was exacerbated by health officials who indiscriminately threw together cholera victims and people suffering from other ailments. It was rumored that doctors were purposefully trying to kill off the sick. In the spring of 1831, riots broke out in St. Petersburg. One demonstrator returning from a melee reported that a doctor had "got a coupl've rocks in the neck; he sure won't forget us for a long time." The following spring, cholera riots broke out in Liverpool. Once again, doctors were the main targets; they were accused of poisoning cholera victims and turning them blue. (Cholera has been called the "blue death" because those suffering from the disease can get so dehydrated that their skin becomes slate-colored.) Similar riots broke out in Aberdeen, Glasgow, and Dublin.

In 1883, during the fifth cholera pandemic, the German physician Robert Koch established the cause of the disease by isolating the *Vibrio cholerae* bacterium. The following year, the pandemic hit Naples. The city dispatched inspectors to confiscate suspect produce. It also sent out disinfection squads, which arrived at the city's tenements with guns drawn. Neapolitans were, understandably, skeptical of both the inspectors and the squads. They responded with an impressive sense of humor, if not necessarily a keen understanding of epidemiology. Demonstrators showed up at city hall with baskets of overripe figs and melons. They proceeded, Snowden writes, "to consume the forbidden fruit in enormous quantities while those who watched applauded and bet on which binger would eat the most."

Eight years later, while the fifth pandemic raged on, one of the most violent cholera riots broke out in what's now the Ukrainian city of Donetsk. Scores of shops were looted, and homes and businesses were burned. The authorities in St. Petersburg responded to the violence by cracking down on workers accused of promoting "lawlessness." According to Loomis, the crackdown prompted more civil unrest, which in turn prompted more repression, and, thus, in a roundabout sort of way, cholera helped "set the stage" for the Russian Revolution.

The seventh cholera pandemic began in 1961, on the Indonesian island of Sulawesi. During the next decade, it spread to India, the Soviet Union, and several nations in Africa. There were no mass outbreaks for the next quarter century, but then one hit Peru in 1991, claiming thirty-five hundred lives; another outbreak, in what is now the Democratic Republic of the Congo, in 1994, claimed twelve thousand.

By most accounts, the seventh pandemic is ongoing. In October, 2010, cholera broke out in rural Haiti, then quickly spread to Port-au-Prince and other major cities. This was nine months after a magnitude-7.0 earthquake had devastated the country. Rumors began to circulate that the source of the outbreak was a base that housed United Nations peacekeeping troops from Nepal. Riots occurred in the city of Cap-Haïtien; at least two people were killed, and flights carrying aid to the country were suspended. For years, the U.N. denied that its troops had brought cholera to Haiti, but it eventually admitted that the rumors were true. Since the outbreak began, eight hundred thousand Haitians have been sickened and nearly ten thousand have died.



Epidemics are, by their very nature, divisive. The neighbor you might, in better times, turn to for help becomes a possible source of infection. The rituals of daily life become opportunities for transmission; the authorities enforcing quarantine become agents of oppression. Time and time again throughout history, people have blamed outsiders for outbreaks. (On occasion, as in the case of the U.N. peacekeeping troops, they've been right.) Snowden recounts the story of what happened to the Jews of Strasbourg during the Black Death. Local officials decided that they were responsible for the pestilence—they had, it was said, poisoned the wells—and offered them a choice: convert or die. Half opted for the former. On February 14, 1349, the rest "were rounded up, taken to the Jewish cemetery, and burned alive." Pope Clement VI issued papal bulls pointing out that Jews, too, were dying from the plague, and that it wouldn't make sense for them to poison themselves, but this doesn't seem to have made much difference. In 1349, Jewish communities in Frankfurt, Mainz, and Cologne were wiped out. To escape the violence, Jews migrated en masse to Poland and Russia, permanently altering the demography of Europe.

Whenever disaster strikes, like right about now, it's tempting to look to the past for guidance on what to do or, alternatively, what not to do. It has been almost fifteen hundred years since the Justinianic plague, and, what with plague, smallpox, cholera, influenza, polio, measles, malaria, and typhus, there are an epidemic number of epidemics to reflect on.

The trouble is that, for all the common patterns that emerge, there are at least as many confounding variations. During the cholera riots, people blamed not outsiders but insiders; it was doctors and government officials who were targeted. Smallpox helped the Spanish conquer the Aztec and Incan Empires, but other diseases helped defeat colonial powers. During the Haitian Revolution, for example, Napoleon tried to retake the French colony, in 1802, with some fifty thousand men. So many of his soldiers died from yellow fever that, after a year, he gave up on the attempt, and also decided to sell the Louisiana Territory to the Americans.

Even the mathematics of outbreaks varies dramatically from case to case. As Adam Kucharski, a professor at the London School of Hygiene & Tropical Medicine and the author of "The Rules of Contagion" (forthcoming in the U.S. from Basic Books), points out, the differences depend on such factors as the mode of transmission, the length of time an individual is contagious, and the social networks that each disease exploits. "There's a saying in my field: 'if you've seen one pandemic, you've seen . . . one pandemic,'" he writes. Among the few predictions about COVID-19 that it seems safe to make at this point is that it will become the subject of many histories of its own. ♦

BOOKS

The Isolation Ward

On loneliness.

BY JILL LEPORE

The female chimpanzee at the Philadelphia Zoological Garden died of complications from a cold early in the morning of December 27, 1878. "Miss Chimpanzee," according to news reports, died "while receiving the attentions of her companion." Both she and that companion, a four-year-old male, had been born near the Gabon River, in West Africa; they had arrived in Philadelphia in April, together. "These Apes can be captured only when young," the zoo superintendent, Arthur E. Brown, explained, and they are generally taken only one or two at a time. In the wild, "they live together in small bands of half a dozen and build platforms among the branches, out of boughs and leaves, on which they sleep." But in Philadelphia, in the monkey house, where it was just the two of them, they had become "accustomed to sleep at night in each other's arms on a blanket on the floor," clutching each other, desperately, achingly, through the long, cold night.

The Philadelphia Zoological Garden was the first zoo in the United States. It opened in 1874, two years after Charles Darwin published "The Expression of the Emotions in Man and Animals," in which he related what he had learned about the social attachments of primates from Abraham Bartlett, the superintendent of the Zoological Society of London:

> Many kinds of monkeys, as I am assured by the keepers in the Zoological Gardens, delight in fondling and being fondled by each other, and by persons to whom they are attached. Mr. Bartlett has described to me the behavior of two chimpanzees, rather older animals than those generally imported into this country, when they were first brought together. They sat opposite, touching each other with their much protruded lips; and the one put his hand on the shoulder of the other. They then mutually folded each other in their arms. Afterwards they stood up, each with one arm on the shoulder of the other, lifted up their heads, opened their mouths, and yelled with delight.

Mr. and Miss Chimpanzee, in Philadelphia, were two of only four chimpanzees in America, and when she died human observers mourned her loss, but, above all, they remarked on the behavior of her companion. For a long time, they reported, he tried in vain to rouse her. Then he "went into a frenzy of grief." This paroxysm accorded entirely with what Darwin had described in humans: "Persons suffering from excessive grief often seek relief by violent and almost frantic movements." The bereaved chimpanzee began to pull out the hair from his head. He wailed, making a sound the zookeeper had never heard before: *Hah-ah-ah-ah-ah*. "His cries were heard over the entire garden. He dashed himself against the bars of the cage and butted his head upon the hard-wood bottom, and when this burst of grief was ended he poked his head under the straw in one corner and moaned as if his heart would break."

Nothing quite like this had ever been recorded. Superintendent Brown prepared a scholarly article, "Grief in the Chimpanzee." Even long after the death of the female, Brown reported, the male "invariably slept on a crossbeam at the top of the cage, returning to inherited habit, and showing, probably, that the apprehension of unseen dangers has been heightened by his sense of loneliness."

Loneliness is grief, distended. People are primates, and even more sociable than chimpanzees. We hunger for intimacy. We wither without it. And yet, long before the present pandemic,

Solitude and seclusion are different from loneliness, a state of profound distress.

ILLUSTRATION BY FRANCESCO CICCOLELLA

with its forced isolation and social distancing, humans had begun building their own monkey houses. Before modern times, very few human beings lived alone. Slowly, beginning not much more than a century ago, that changed. In the United States, more than one in four people now lives alone; in some parts of the country, especially big cities, that percentage is much higher. You can live alone without being lonely, and you can be lonely without living alone, but the two are closely tied together, which makes lockdowns, sheltering in place, that much harder to bear. Loneliness, it seems unnecessary to say, is terrible for your health. In 2017 and 2018, the former U.S. Surgeon General Vivek H. Murthy declared an "epidemic of loneliness," and the U.K. appointed a Minister of Loneliness. To diagnose this condition, doctors at U.C.L.A. devised a Loneliness Scale. Do you often, sometimes, rarely, or never feel these ways?

> I am unhappy doing so many things alone.
> I have nobody to talk to.
> I cannot tolerate being so alone.
> I feel as if nobody really understands me.
> I am no longer close to anyone.
> There is no one I can turn to.
> I feel isolated from others.

In the age of quarantine, does one disease produce another?

"Loneliness" is a vogue term, and like all vogue terms it's a cover for all sorts of things most people would rather not name and have no idea how to fix. Plenty of people like to be alone. I myself love to be alone. But solitude and seclusion, which are the things I love, are different from loneliness, which is a thing I hate. Loneliness is a state of profound distress. Neuroscientists identify loneliness as a state of hypervigilance whose origins lie among our primate ancestors and in our own hunter-gatherer past. Much of the research in this field was led by John Cacioppo, at the Center for Cognitive and Social Neuroscience, at the University of Chicago. Cacioppo, who died in 2018, was known as Dr. Loneliness. In the new book "Together: The Healing Power of Human Connection in a Sometimes Lonely World" (Harper Wave), Murthy explains how Cacioppo's evolutionary theory of loneliness has been tested by anthropologists at the University of Oxford, who have traced its origins back fifty-two million years, to the very first primates. Primates need to belong to an intimate social group, a family or a band, in order to survive; this is especially true for humans (humans you don't know might very well kill you, which is a problem not shared by most other primates). Separated from the group—either finding yourself alone or finding yourself among a group of people who do not know and understand you—triggers a fight-or-flight response. Cacioppo argued that your body understands being alone, or being with strangers, as an emergency. "Over millennia, this hypervigilance in response to isolation became embedded in our nervous system to produce the anxiety we associate with loneliness," Murthy writes. We breathe fast, our heart races, our blood pressure rises, we don't sleep. We act fearful, defensive, and self-involved, all of which drive away people who might actually want to help, and tend to stop lonely people from doing what would benefit them most: reaching out to others.

The loneliness epidemic, in this sense, is rather like the obesity epidemic. Evolutionarily speaking, panicking while being alone, like finding high-calorie foods irresistible, is highly adaptive, but, more recently, in a world where laws (mostly) prevent us from killing one another, we need to work with strangers every day, and the problem is more likely to be too much high-calorie food rather than too little. These drives backfire.

Loneliness, Murthy argues, lies behind a host of problems—anxiety, violence, trauma, crime, suicide, depression, political apathy, and even political polarization. Murthy writes with compassion, but his everything-can-be-reduced-to-loneliness argument is hard to swallow, not least because much of what he has to say about loneliness was said about homelessness in the nineteen-eighties, when "homelessness" was the vogue term—a word somehow easier to say than "poverty"—and saying it didn't help. (Since then, the number of homeless Americans has increased.) Curiously, Murthy often conflates the two, explaining loneliness as feeling homeless. To belong is to feel at home. "To be at home is to be known," he writes. Home can be anywhere. Human societies are so intricate that people have meaningful, intimate ties of all kinds, with all sorts of groups of other people, even across distances. You can feel at home with friends, or at work, or in a college dining hall, or at church, or in Yankee Stadium, or at your neighborhood bar. Loneliness is the feeling that no place is home. "In community after community," Murthy writes, "I met lonely people who felt homeless even though they had a roof over their heads." Maybe what people experiencing loneliness and people experiencing homelessness both need are homes with other humans who love them and need them, and to know they are needed by them in societies that care about them. That's not a policy agenda. That's an indictment of modern life.

In "A Biography of Loneliness: The History of an Emotion" (Oxford), the British historian Fay Bound Alberti defines loneliness as "a conscious, cognitive feeling of estrangement or social separation from meaningful others," and she objects to the idea that it's universal, transhistorical, and the source of all that ails us. She argues that the condition really didn't exist before the nineteenth century, at least not in a chronic form. It's not that people—widows and widowers, in particular, and the very poor, the sick, and the outcast—weren't lonely; it's that, since it wasn't possible to survive without living among other people, and without being bonded to other people, by ties of affection and loyalty and obligation, loneliness was a passing experience. Monarchs probably *were* lonely, chronically. (Hey, it's lonely at the top!) But, for most ordinary people, daily living involved such intricate webs of dependence and exchange—and shared shelter—that to be chronically or desperately lonely was to be dying. The word "loneliness" very seldom appears in English before about 1800. Robinson Crusoe was alone, but never lonely. One exception is "Hamlet": Ophelia suffers from "loneliness"; then she drowns herself.

Modern loneliness, in Alberti's view, is the child of capitalism and secularism. "Many of the divisions and hierarchies that have developed since the eighteenth century—between self and world, individual and community, public and private—have been naturalized through the politics and philosophy of individualism," she writes. "Is it any coincidence that a language of loneliness emerged at the same time?" It is not a coincidence. The rise of privacy, itself a product of market capitalism—privacy being something that you buy—is a driver of loneliness. So is individualism, which you also have to pay for.

Alberti's book is a cultural history (she offers an anodyne reading of "Wuthering Heights," for instance, and another of the letters of Sylvia Plath). But the social history is more interesting, and there the scholarship demonstrates that whatever epidemic of loneliness can be said to exist is very closely associated with living alone. Whether living alone makes people lonely or whether people live alone because they're lonely might seem to be harder to say, but the preponderance of the evidence supports the former: it is the force of history, not the exertion of choice, that leads people to live alone. This is a problem for people trying to fight an epidemic of loneliness, because the force of history is relentless.

Before the twentieth century, according to the best longitudinal demographic studies, about five per cent of all households (or about one per cent of the world population) consisted of just one person. That figure began rising around 1910, driven by urbanization, the decline of live-in servants, a declining birth rate, and the replacement of the traditional, multigenerational family with the nuclear family. By the time David Riesman published "The Lonely Crowd," in 1950, nine per cent of all households consisted of a single person. In 1959, psychiatry discovered loneliness, in a subtle essay by the German analyst Frieda Fromm-Reichmann. "Loneliness seems to be such a painful, frightening experience that people will do practically everything to avoid it," she wrote. She, too, shrank in horror from its contemplation. "The longing for interpersonal intimacy stays with every human being from infancy through life," she wrote, "and there is no human being who is not threatened by its loss." People who are not lonely are so terrified of loneliness that they shun the lonely, afraid that the condition might be contagious. And people who are lonely are themselves so horrified by what they are experiencing that they become secretive and self-obsessed—"it produces the sad conviction that nobody else has experienced or ever will sense what they are experiencing or have experienced," Fromm-Reichmann wrote. One tragedy of loneliness is that lonely people can't see that lots of people feel the same way they do.

"During the past half century, our species has embarked on a remarkable social experiment," the sociologist Eric Klinenberg wrote in "Going Solo: The Extraordinary Rise and Surprising Appeal of Living Alone," from 2012. "For the first time in human history, great numbers of people—at all ages, in all places, of every political persuasion—have begun settling down as singletons." Klinenberg considers this to be, in large part, a triumph; more plausibly, it is a disaster. Beginning in the nineteen-sixties, the percentage of single-person households grew at a much steeper rate, driven by a high divorce rate, a still-falling birth rate, and longer lifespans over all. (After the rise of the nuclear family, the old began to reside alone, with women typically outliving their husbands.) A medical literature on loneliness began to emerge in the nineteen-eighties, at the same time that policymakers became concerned with, and named, "homelessness," which is a far more dire condition than being a single-person household: to be homeless is to be a household that does not hold a house. Cacioppo began his research in the nineteen-nineties, even as humans were building a network of computers, to connect us all. Klinenberg, who graduated from college in 1993, is particularly interested in people who chose to live alone right about then.

I suppose I was one of them. I tried living alone when I was twenty-five, because it seemed important to me, the way owning a piece of furniture that I did not find on the street seemed important to me, as a sign that I had come of age, could pay rent without subletting a sublet. I could afford to buy privacy, I might say now, but then I'm sure I would have said that I had become "my own person." I lasted only two months. I didn't like watching television alone, and also I didn't have a television, and this, if not the golden age of television, was the golden age of "The Simpsons," so I started watching television with the person who lived in the apartment next door. I moved in with him, and then I married him.

This experience might not fit so well into the story Klinenberg tells; he argues that networked technologies of communication, beginning with the telephone's widespread adoption, in the nineteen-fifties, helped make living alone possible. Radio, television, Internet, social media: we can feel at home online. Or not. Robert Putnam's influential book about the decline of American community ties, "Bowling Alone," came out in 2000, four years before the launch of Facebook, which monetized loneliness. Some people say that the success of social media was a product of an epidemic of loneliness; some people say it was a contributor to it; some people say it's the only remedy for it. Connect! Disconnect! *The Economist* declared loneliness to be "the leprosy of the 21st century." The epidemic only grew.

This is not a peculiarly American phenomenon. Living alone, while common in the United States, is more common in many other parts of the world, including Scandinavia, Japan, Germany, France, the U.K., Australia, and Canada, and it's on the rise in China, India, and Brazil. Living alone works best in nations with strong social supports. It works worst in places like the United States. It is best to have not only an Internet but a social safety net.

Then the great, global confinement began: enforced isolation, social distancing, shutdowns, lockdowns, a human but inhuman zoological garden. Zoom is better than nothing. But for how long? And what about the moment your connection crashes: the panic, the last tie severed? It is a terrible, frightful experiment, a test of the human capacity to bear loneliness. Do you pull out your hair? Do you dash yourself against the walls of your cage? Do you, locked inside, thrash and cry and moan? Sometimes, rarely, or never? More today than yesterday? ♦

18+

WHAT IS
AVAXHOME?

AVAXHOME –

the biggest Internet portal, providing you various content: brand new books, trending movies, fresh magazines, hot games, recent software, latest music releases.

Unlimited satisfaction one low price
Cheap constant access to piping hot media
Protect your downloadings from Big brother
Safer, than torrent-trackers

18 years of seamless operation and our users' satisfaction

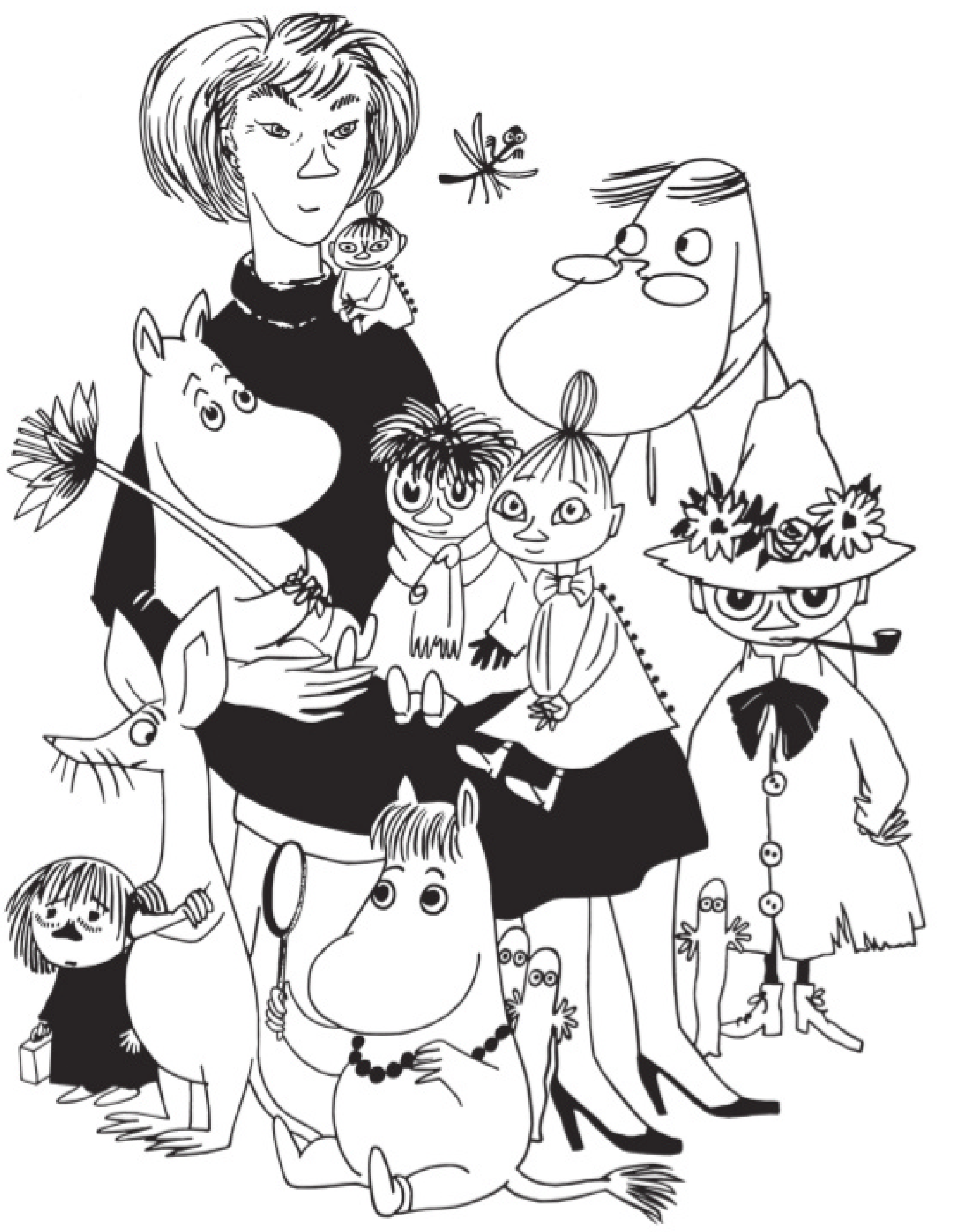
All languages
Brand new content
One site

AVXLIVE.ICU

AvaxHome - Your End Place

We have everything for all of your needs. Just open https://avxlive.icu

BOOKS



Rooms of Her Own

The letters of Tove Jansson.

BY SHEILA HETI

The Finnish artist recorded the joys—and strains—of being a cultural icon.

In the nineteen-fifties and sixties, one of the most famous cartoonists in the world was a lesbian artist who lived on a remote island off the coast of Finland. Tove Jansson had the status of a beloved cultural icon—adored by children, celebrated by adults. Before her death, in 2001, at the age of eighty-six, Jansson produced paintings, novels, children's books, magazine covers, political cartoons, greeting cards, librettos, and much more. But most of Jansson's fans arrived by way of the Moomins, a friendly species of her invention—rotund white creatures that look a little like upright hippos, and were the subject of nine best-selling books and a daily comic strip that ran for twenty years.

Jansson travelled frequently to conduct her duties as the ambassador of Moominvalley, mingling at parties where businessmen wore Moomin ties. In 1963, she wrote home, from the midst of professional obligations in Stockholm, "I was woken by another TV crew wanting a comment on the cultural situation. . . . I've still got masses to sort out with family and cousins and children's culture reps and translators and art galleries. . . . I'm feeling pretty cocky but also trying to maintain my image: gentle, cultivated, enraptured child of nature."

The work of being a public figure was neatly summed up, for her, in the never-ending burdens of correspondence. Her short story "Messages," published near the end of her life, is composed of snippets of letters she received:

> Hi my name is Olavi. You write well but last time you didn't make a happy ending. Why do you do this?
>
> We look forward to your valued reply soonest concerning Moomin motifs on toilet paper in pastel shades
>
> Hi! We're three girls in a mad rush with our essays about you could you help us by saying in just a few words how you started writing and why and what life means to you and then a message to young people you know the kind of thing. Thanks in advance
>
> Dear Miss Jansson, You must understand that the only way I can earn a living are panholders with Moomin figures which I design myself and make in the kitchen without any paid help at present. How would 6% be for a start

Several pages of this is charming; forty years' worth would have been wearying. Yet, as the sole emissary of her fictional world, Jansson felt the need to be gracious. In 1948, after she had published the first couple of Moomin books, but before anyone was demanding her approval of Moomin oven mitts, she already had opinions about the duties of fame. Jansson's younger brother Lars (whom she called Lasse) had mailed some unsolicited poetry to Dorothy Parker, who never responded. In a letter to a friend, Jansson was offended on his behalf: "If I was the Great Woman, and received some (really quite good) love poems from a young man in Finland . . . in my own language with an adoring dedication, I'd damn well send a few lines in reply." She would not be that sort of Great Woman.

But, then, what sort? Twenty years after Jansson's death, we now have a record of the joys—and strains—of a lifetime of correspondence. "Letters from Tove" (University of Minnesota), a four-hundred-and-eighty-page volume, edited by Boel Westin and Helen Svensson and translated by Sarah Death, includes dispatches to her family, friends, and lovers. The selection begins during her days as an art student in Stockholm and culminates in the early nineteen-eighties, when her letter writing (though not her work) appears to have stopped. Along with Westin's "Tove Jansson: Life, Art, Words" (2014), a comprehensive English-language biography of Jansson, these letters offer the most complete portrait of the artist to date. They show a person who is increasingly selective about which parts of herself she will share with whom. She writes to most of her correspondents in the mode of a traveller, awake to her surroundings and the world. With only a few does she expose her inner life, and, once she becomes Finland's beloved "Moominmamma," she shares her artistic struggles with nobody.

Jansson was born in Helsinki in 1914, the eldest of three children in a Swedish-speaking family (a minority in Finland). Her father was a charismatic sculptor and her mother a successful illustrator. "Home and studio were one," as Westin writes in her biography, "with no clear distinction between work and family life." When she was still quite young, Tove began helping her mother with her many commissions. She noted in her diaries, "I want to be a wild thing, not an artist."

At twenty-three, Jansson left home to study painting in Paris, where she soon enrolled at the École des Beaux-Arts. Her yearning, detailed letters to her family express her disappointment with the school and its irrelevant assignments: "This time for instance it's 'Moses strikes the rock' and 'People waiting for a bus.' We have four days to get it done." After two weeks, she quit the school, complaining to her mother that "Beaux Arts was a place for having fun or hoping for the Prix de Rome, and possibly one gleaned some superficial technique to use in disguising one's mediocre talents." Jansson transferred to a smaller atelier, run by a more radical Swiss artist who, learning of her defection, "went quite pale at the thought of the terrible danger I'd escaped from."

After leaving school, with the Second World War unfolding, she struggled to complete what she hoped would be a masterwork: a psychologically tense, large-scale oil portrait of her family. But the painting was exhibited, in a group show, to disappointing reviews. Months later, Jansson wrote unhappily about her work in a journal, "Too many canvases are 'able,' or forced, or 'artificial.' . . . My greatest asset should be painting, but either it is failing or I am failing."

It was during these turbulent creative years that Jansson invented the Moomins, a close-knit family made up of the boyish Moomintroll, the obliging and practical Moominmamma, the adventure-seeking Moominpappa, and Moomintroll's pretty and vain girlfriend, Snork Maiden, along with an auxiliary cast of non-Moomin friends. They live together in peaceful, verdant Moominvalley, but frequently venture beyond its borders. Jansson wrote to a friend that the characters had taken shape "when I was feeling depressed and scared of the bombing and wanted to get away from my gloomy thoughts to something else entirely. . . . I crept into an unbelievable world where everything was natural and benign—and possible."

But she seemed, initially, to doubt the worth of her escapist pleasure, and she put the drawings aside for years. Much later, Jansson recalled that, during the war, "one's work stood still; it felt completely pointless to try to create pictures." In 1945, at a friend's urging, she finally published the stories and drawings as a book, "The Moomins and the Great Flood." Illustrated with line drawings and sepia paintings, the story is fascinating for how un-escapist it seems: Moomintroll and his mother wander through a perilous landscape, hungry and cold, searching for Moominpappa. Jansson's next book, "Comet in Moominland" (1946), continues in the same anxious vein; this time, the looming threat is from outer space. Still, if her stories contain some of the harshness of life, they always end happily, with a joyous return to Moominvalley, family and friends all safe.

The Moomins were an immediate hit. One critic praised Jansson as "an artist with two native languages"—words and images. A decade after "The Great Flood," by which point three more Moomin books had appeared, she was asked by the London *Evening News* to turn the comic into a daily strip. Jansson was proud and relieved: "Permanent employment—the first time in my life." The Moomins spread to more than a hundred newspapers around the globe. There was a television show in Sweden, an anime series in Japan, and, of course, a deluge of merchandise: "trinkets and marzipan and candles," cups and dishes, even menstrual pads. Jansson replied to her new fans with the same warmth and wonder that distinguished the Moomin world. A two-page, illustrated letter to a child named Ruth, from 1967, reads, in part:

> There might be quite a lot of trolls in Ireland, I've heard? Here, they're all hibernating. . . . Soon, I'll start waiting for spring. Then, I go on to my island in the Finnish Gulf, a tiny one with no trees or bushes—only rock and wild flowers. And big, beautiful storms. You would love it!

What accounts for the popularity of her enigmatic characters? For one thing, Jansson's intelligent intimacy and humor, which suffuses the books and her letters. She wasn't drawn to nihilism, like many postwar artists, or to any Freud-inspired movements, with their suggestive, anarchic dreamscapes. In a letter, she deemed Surrealism "seductive but, for me, without potential for development. A gown so sensational one can only wear it for a single season." Instead, she created a reassuring world with a moral code, and characters with problems much like our own. The Moomins are not so much cute as strangely familiar, as though Jansson happened to look in a new direction and find these tender and serious fellow-creatures, who had been with us all along.

"Letters from Tove" is organized not by chronology but by correspondent, with a chapter devoted to each of Jansson's most meaningful interlocutors. This has the illuminating effect, for readers, of retelling the same story from many angles. Of all her correspondents, the person Jansson revealed herself to most thoroughly was the Russian-Jewish photographer Eva Konikoff. The two met when Jansson was in her twenties, and they travelled in the same Helsinki artistic circles until 1941, when Konikoff fled to the United States, and their correspondence began. Jansson's letters reach their lyrical and emotional heights during the war years, when she was in her middle to late twenties. They are poetic and

PREVIOUS PAGE: © MOOMIN CHARACTERS™

full of dread: "I lie here looking at the birch tree outside my window, which rustles like a thousand silk petticoats—the sea is a greeny-black and the first rain has arrived," while in the forest are "big burnt areas left by those airborne oafs and their firebombs. . . . The planes come roaring in over our heads on a daily basis, like death's black cross in the heavens."

When a boyfriend of Jansson's, Tapsa, came home on a brief, much anticipated leave from the front, he visited a mistress who was "big and platinum blonde and very made-up and seemed kind and pathetic," a description that somehow evokes a Moomin. Hours later, in bed, after an evening alone with Tapsa, Jansson tried to summon a feeling of love, but the ongoing stress of the war—political arguments with her father, one of her brothers off fighting, the hateful anti-Semitic slogans—weighed heavily on her. In a letter to Konikoff, she recounts being suddenly repelled by Tapsa:

> Everything that makes me not want to get married came back to me, all the men I've seen through and despised. . . . I see what will happen to my Painting if I get married. Because when all is said and done I have in me all those inherited female instincts for solace, admiration, submission, self-sacrifice. Either a bad painter or a bad wife. And if I become a "good" wife, then his work will be more important than mine, my intellect be subordinate to his, I shall bear him children, children to be killed in future wars! And at the same time I shall see through it all, and know that I acted against everything I believed in.

A breakthrough in an artist's life often corresponds with a breakthrough in her art, and so it was for Jansson. In 1946, the year after the first Moomin book had appeared, her brother Lars introduced her to the theatre director Vivica Bandler. "I saw a tall aristocratic girl with a prominent nose, thick straight eyebrows and a defiantly Jewish mouth," Jansson writes. "She is blind in one eye, but the other is clear, dark, penetrating." And, although Jansson had a boyfriend and Bandler was married, they began an affair. She describes experiencing love with a woman for the first time:

> It came as such a huge surprise. Like finding a new and wondrous room in an old house one thought one knew from top to bottom. Just stepping straight in, and not being able

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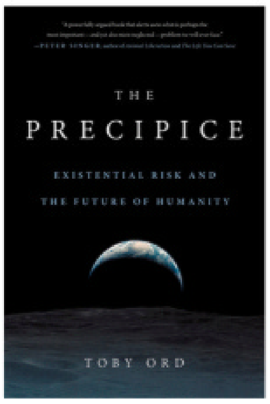
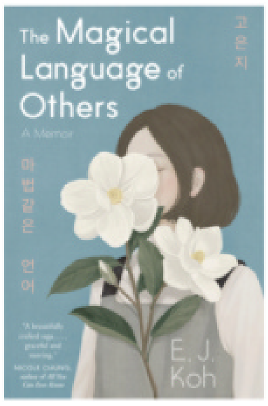
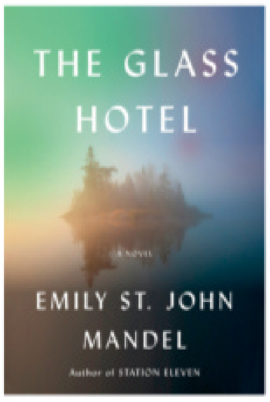
BRIEFLY NOTED



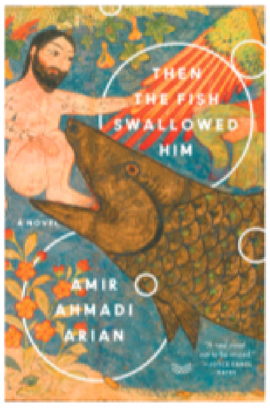
The Precipice, *by Toby Ord (Hachette).* In a book that seems made for the present moment, Ord, a moral philosopher, examines and seeks to quantify existential risk—the looming threats that might someday wipe out humanity. There's good news (it's exceedingly unlikely that a star will blunder through our solar system and "disrupt planetary orbits, causing the Earth to freeze or boil or even crash into another planet") and bad (climate change is dire, though bioengineered pathogens, released by evildoers or laboratory accidents, might prove a speedier scourge). Still, there are ample proposals for risk mitigation, and readers may find the sections that argue for why humanity deserves saving, and why we're equipped to face the challenges, even more arresting than the array of potential cataclysms.



The Magical Language of Others, *by E. J. Koh (Tin House).* This memoir relates the stories of four generations of women in Koh's family, tracing the ways that language binds them together. When Koh was a teen-ager in California, in the two-thousands, her parents returned to Korea, and her mother sent a string of letters—forty-nine in all—back to her daughter. Translations of these dispatches, filled with the music of Korean-inflected English, alternate with accounts of tectonic shifts in Koh's life. While she is studying in Japan, memories of a Japanese-speaking grandmother who witnessed the Jeju Island massacre compel Koh to learn the language, befriending local shopkeepers and salarymen as she does. "They sat next to me, watered me with conversation," she writes. "You cannot cook a grain of rice by itself."



The Glass Hotel, *by Emily St. John Mandel (Knopf).* The 2008 financial crisis becomes, in this panoramic novel, a platform for questions about self-reinvention and the ruptures of modern society. At the story's center are the Canadian half siblings Paul, an addict and would-be musician, and Vincent, a resourceful woman of many permutations: bartender, assistant cook on a container ship, and girlfriend of a Bernie Madoff-like investor, whose wealth, neurotic accomplices, and downfall illustrate the strange webs in "the kingdom of money." While Vincent's search for purpose propels the novel, its subjects are pleasingly omnivorous, ranging from the logistics of global shipping to a fraudster's elaborate prison fantasies of a "counterlife."



Then the Fish Swallowed Him, *by Amir Ahmadi Arian (HarperVia).* The English-language début of a celebrated Iranian writer and translator, this novel follows a middle-aged bus driver, Yunus, who is imprisoned after he is falsely accused of helping organize a union strike with the aid of the C.I.A. and Mossad. For twenty-five years, Yunus has led an austere life; his closest relationships are with Tehran's crowded, smoggy streets, the routes of which he envisages while trapped in his cell. Despite his tepid participation in the strike, Yunus endures torture and solitary confinement, as well as an apocalypse-obsessed and unsettlingly charismatic interrogator—a depiction of how abstract political machinations crystallize into absurd, capricious violence.

> to fathom how one had never known it existed. . . . I’m finally experiencing myself as a woman where love is concerned, it’s bringing me peace and ecstasy for the first time.

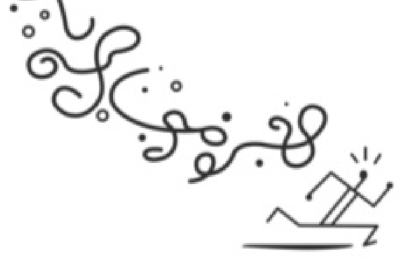
To Konikoff, Jansson writes that she “never for a moment saw anything unnatural” in her desire, and, although the affair ended, a longtime friendship and a theatrical collaboration eventually emerged from it. Jansson returned to her boyfriend, Atos, and, in a letter the following year, awkwardly proposed to him that they marry: “It wouldn’t change our way of life, I don’t think. If you don’t want to, we can talk about something else when you get back.” The marriage never occurred, and, six years after the affair with Bandler, Jansson, still reminiscing in letters to Konikoff, writes that “the happiest and most genuine course for me would be to go over to the ghost side.”

Jansson’s most profound relationships were with women, and her letters to friends were far more intimate even than her letters to her beloved Atos. In 1956, she met Tuulikki Pietilä (“Tooti”), a prolific graphic artist and engraver. They would remain partners for forty-five years, until Jansson’s death. But, as Westin and Svensson put it, “anyone who lived with Tove Jansson also had to live with her family.” Her mother, nicknamed Ham, stayed with Jansson on and off. Even as a teen-ager, preparing to go away to school, Jansson had worried about her mother. In a letter from 1961, she describes the stress of managing both Tooti and Ham in their “all-female household.” She felt that it had become impossible to please one without displeasing the other, and during a time of intense strife she wrote to a friend, “Sometimes I think I hate them both and it makes me feel ill.”

One of Jansson’s short stories, “Travelling Light,” from 1987, explores the fantasy of being liberated from the endless demands of other people. It begins with a ship leaving the shore. “I wish I could describe the enormous relief I felt when they finally pulled up the gangway!” the narrator says. But soon he finds himself roped into conversation with a stranger, who begins “holding forth about his misunderstood childhood”; even worse, the two men turn out to be cabinmates. Desperate to get away from everyone and sleep in peace, the narrator ends up huddled on the wet deck of the ship, draped in his overcoat, when an old woman appears above him, whispering, “I’ll show you some photos of my son. This is what Herbert looked like when he was four.” Humans are such needy creatures!

This short story belongs to the second half of Jansson’s creative life. In 1959, after seven years and more than ten thousand drawings, she abandoned the Moomin strip, handing it over to her brother Lars. (A beautiful, complete collection of Jansson’s cartoons was published by Drawn & Quarterly, in 2014.) Jansson wrote to a friend about ending the daily comics, “I never spare them a thought now it’s over. I’ve completely drawn a line under all that. Just as you wouldn’t want to think back on a time you had toothache.” In the early seventies, after the death of her mother, she turned to fiction for adults. She wrote five novels; a memoir, “Sculptor’s Daughter”; and many short stories (some of which were posthumously collected by New York Review Books in “The Woman Who Borrowed Memories”). Her overwhelming Moomin duties never abated, and she all but gave up writing for children.

Remnants of Jansson’s early style are preserved in her more mature work. Her later novels—“The True Deceiver” (1982) and “Fair Play” (1989)—are episodic, as if producing comics had trained her imagination in a certain form. She created characters, then turned them around in a variety of situations, with the cartoonist’s confidence that the empty white spaces between chapters would be rich and evocative. But she also plumbed a new kind of darkness: the tangible menaces of her cartoon worlds—forests, seas, the infinitude of the cosmos—now took shape within the unruly depths of the characters themselves. It was a subtle realm that must have been satisfying to explore. As her fiction became more interior and autobiographical, Jansson’s letters seem to have become more superficial. She sent far fewer of them, funnelling her introspections into one stream, not two.



Jansson wrote “The True Deceiver,” one of her greatest novels, when she was in her late sixties. Riveting, original, and strange, it concerns Anna Aemelin, a writer and illustrator of children’s books, who lives alone and whose life is infiltrated—for better and worse—by Katri, a mysterious loner, who behaves at once like an assistant and a grifter. Anna has been endowed with Jansson’s preoccupation with maintaining an image—that performance as a “gentle, cultivated, enraptured child of nature.” To this end, she has a system for organizing the many fan letters she receives from her child readers:

> Pile A was from the very young, who expressed their admiration in pictures, mostly drawings of bunny rabbits. If there was a written message, the child’s mother had written it. Pile B contained requests that were often urgent, especially with regard to birthdays. Pile C was what Anna called the Sad Cases pile, and these letters required great care and reflection.

Katri suggests that Anna use a form letter to deal with the deluge, but Anna protests. What if siblings, or children in the same class, compared? When Katri proposes enlisting a secretary, Anna is infuriated: “It’s me they’re asking, not anyone else . . . !” Katri tells her not to sentimentalize her correspondents simply because they are young, and their letters awkward and misspelled. “I have gradually learned that everyone, absolutely everyone of every size, is out to get something,” Katri says. This may be the most cynical line in any of Jansson’s novels. It is as though the Great Woman saw, in her fiction, at least, something true about what animates the exchange between an artist and her fans. The artist wants to be seen as the figure she is striving to be; the fan simply wants to be seen. Anna finally gives Katri the task of replying to the children, but later chastises her for not doing a good enough job:

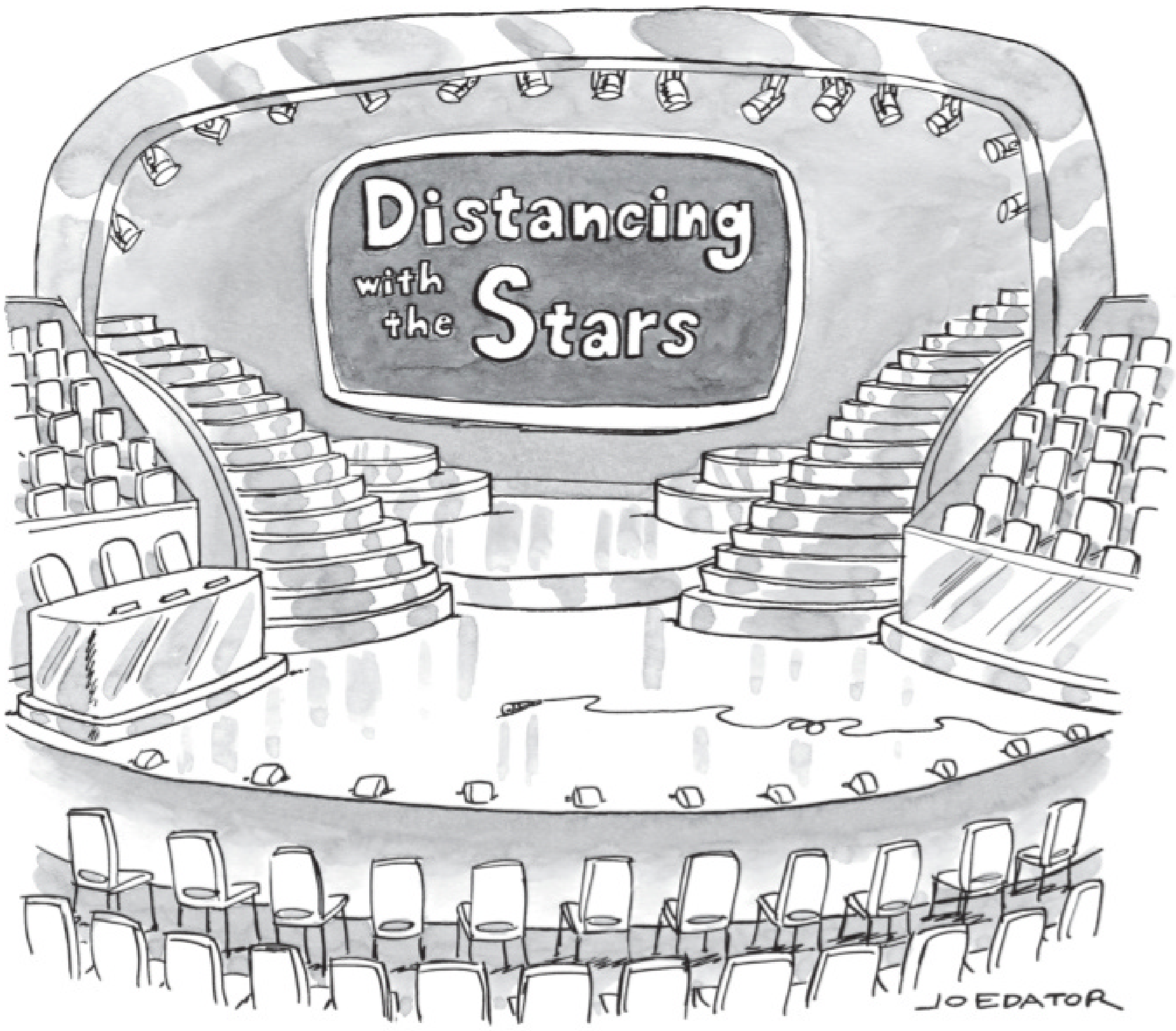
> She put her hand on the pile of letters and declared, “More affection! Bigger writing!

And talk about my own cat: describe it, talk about it . . ."

"But you don't have a cat."

"That doesn't matter. The whole point is to give them a nice letter . . . You have to learn how it's done. But I wonder if you can. I almost think you don't like them."

Katri shrugged her shoulders and smiled her quick wolfish smile. "Neither do you," she said.



To avoid the bombardments of the world—to find someplace where the performance could end—Jansson sought out the pleasures of seclusion. In Helsinki, she retreated to her studio, where she "couldn't be bothered to sweep up" and a "veil of tobacco smoke" covered the room. In the summers, she lived in small, rustic houses on a series of remote islands in the Gulf of Finland: as a child, with family or friends; later, alone or with Pietilä. One summer, Jansson wrote to her joyfully about an island storm:

> The family got all worked up and took delight in disaster as usual. Lasse and I rushed round looking at the breakers, the usual waterfalls started up and the inlet turned into a torrent. Before we knew it the water was up to the sauna and there was the usual boat business, ropes tangling in all directions. . . . The floor started floating away. The outer cellar was full of frantic frogs and the waves brought the full chaos of Sjöberg breaking over us. . . . We felt so sorry for you, missing out on the ghastly majesty of it all, but you wait and see, we're bound to get even bigger and better storms on this island.

"The Summer Book," her first novel, is constructed around this idyll. A grandmother and granddaughter roam a tiny island, absorbed in a world made up of their own thoughts and adventures, and their connection with each other.

On her islands, Jansson's many contrary aspects—the self that valued solitude and the self that valued friendship; the self that loved adventure and the self that loved routine—were easily made one. In a letter, Jansson describes waking up early with Pietilä, "always simultaneously though we sleep in separate beds." They lie together in the mornings and listen to the radio; Jansson lets out the cat, makes coffee, reads novels. Later, she walks along the beach and brings in the wood:

> We rarely clean the house and only have the occasional wash, with much brouhaha and pans of hot water on the ground outside. Then we do our own private thing until dinner, which we eat sometime in the middle of the day, our noses in our books. We get on with our work. . . . We don't talk much. And so the days pass in blessed tranquility.

Even in the city, the couple preserved a distance within their intimacy; they kept separate apartments, joined by an attic corridor through which they visited each other every day.

As a young artist, Jansson built her narratives around an idealized notion of home: her creatures ventured out on their own, but some sense of safety followed them everywhere, an assurance of a familial love that left them to enjoy their solitude, rather than fear it. In "Comet in Moominland," Sniff, a mouselike creature, is off exploring new terrain with a friend. He finds himself at the mouth of a vast, empty cavern, and addresses his companion:

> "Don't disturb me," said Sniff solemnly. "This is the biggest moment of my life so far, and it's my first cave." He smoothed the sand with his tail and sighed. "I shall live here forever," he thought. "I shall put up little shelves and dig a sleeping-hole in the sand, and have a lamp burning in the evenings. And perhaps I'll make a rope ladder so that I can go up to the roof and look at the sea."

Much of Jansson's later fiction expands this idea of contentment. Love, for her, is premised on a delicate balance between the reliable presence of another person and the freedom to inhabit one's private universe. Unlike the intrusive letter writers in "Messages," who demand a presentation of the self, genuine companionship shields the self, allowing one's interiority to deepen; this is the alchemy of true mutuality. In "Fair Play," a novel that is loosely based on Jansson and Pietilä's relationship, Mari, a writer, and Jonna, an artist, live and work in side-by-side studios. Jonna receives an award that will take her to Paris, to a studio "meant for her use alone." Worried about leaving Mari behind, she is unsure whether to accept. She nervously justifies herself, explaining "the importance of illustration, the painstaking labor, the concentration" needed to do one's best work. But Mari finds herself unafraid of the prospect:

> A daring thought was taking shape in her mind. She began to anticipate a solitude of her own, peaceful and full of possibility. She felt something close to exhilaration, of a kind that people can permit themselves when they are blessed with love. ♦

Forché, in California, in 1977. Her poems ask what we can do with what we see.

MARSHA BOSTON / COURTESY CAROLYN FORCHÉ

Voices Carry

Carolyn Forché's education in looking.

BY HILTON ALS

In a 1961 interview, the great modernist poet Marianne Moore expressed ambivalence about her popular 1943 antiwar verse, "In Distrust of Merits." "As form, what has it?" Moore said. "It is just a protest—disjointed, exclamatory. . . . First this thought and then that." Moore was not the first author to question what you might call her reactive voice. W. H. Auden famously turned his back on his poem "September 1, 1939," written on the occasion of Germany's invasion of Poland—"All I have is a voice / To undo the folded lie . . . / We must love one another or die"—because he considered the work fundamentally dishonest. "After it had been published," he said, "I came to the line 'We must love one another or die' and said to myself: 'That's a damned lie! We must die anyway!'" Implicit in Auden's and Moore's self-criticism is their aversion not only to the declarative but to the general—to the poet's "I" taking on the mantle of "we." And yet the English-language reader is particularly attuned to that kind of broad rhetoric, which can be found in poems ranging from Alfred Lord Tennyson's "The Charge of the Light Brigade" to Maya Angelou's "Still I Rise," because, despite Auden's claim that "poetry makes nothing happen," we equate political poetry with momentum and a kind of galvanizing *sound*—a cry of victory in a world hell-bent on oppression and darkness.

It's precisely the absence of those easy markers—the triumph of good over evil, truth lighting the way—that makes the poet and activist Carolyn Forché's work chilling and unique. For a large part of her career, Forché, who is now sixty-nine, has been characterized as a political poet. Which she is, though she prefers the term "poetry of witness." Her poems ask again and again, What can we do with what we see and live through? They help us to consider our memories of Auschwitz or an image of immigrants drowned in the Rio Grande. In our deeply bifurcated world, Forché's best writing engages in a kind of dialectic, one in which the truth of experience burns as brightly as the author's intuition and imagination. Her poetry and her fascinating 2019 memoir, "What You Have Heard Is True," which describes her time in El Salvador shortly before and during the civil war there, are filled with refugees, the dispossessed, and survivors, acutely observed in public places, near bodies of water, in garbage dumps. These are people Forché is desperate not to forget. Nor can she forget the young woman she once was, a woman who, as she told Jonathan Cott, for his 1987 book, "Visions and Voices," "wasn't equipped to see or analyze the world." Of her travels in El Salvador, she said to Cott:

> My perceptions were very distorted—and I'm even talking about visual perception. I would notice things in very general terms, but there were certain things I would fail to see.
>
> I would always marvel at the wealthy women in the suburbs of San Salvador—women playing canasta all day—and I spent many hours talking to them. They did not see poverty, it didn't exist for them. First of all, they never went outside the capital city, but even in the city they could go through a street in a car and not see the mother who had made a nest in rubber tires for her babies. . . .
>
> Now, as to what I didn't see: I was once driving past rows of cotton fields—all I could see on either side of the highway for miles was cotton fields, and it was dusty and hot, and I was rolling along thinking about something in my usual way, which is the way that has been nurtured in this country. But I didn't see between the rows, where there were women and children, emaciated, in a stupor, because pesticide planes had swept over and dropped chemicals all over them, and they were coughing

> and lethargic from those poisonous clouds . . . There they were, and I hadn't seen them. I had only seen cotton and soil between cotton plants, and a hot sky—I saw the thing endlessly and aesthetically, I saw it in a certain spatial way. So I had to be taught to look and to remember and to think about what I was seeing. . . .
>
> [W]e Americans . . . tend to register perceptions without codifying them in any political, historical, or social way. There's no sense of what creates or contributes to or who benefits from a situation. And I'm not talking about a prescriptive political ideology now . . . [but] a process of understanding.

In order to understand what Forché is doing on the page, you have to look between the rows of type, and see what she leaves in the white space of your imagination. You have to rejigger, if not jettison entirely, your ideas or preconceptions about political writing and about what makes a poem. Forché's stately stanzas—her writing is never hurried—are the work of a literary reporter, Gloria Emerson as filtered through the eyes of Elizabeth Bishop or Grace Paley. Free of jingoism but not of moral gravity, Forché's work questions—when it does question—how to be or to become a thinking, caring, communicating adult. Taken together, Forché's five books of verse—the most recent, "In the Lateness of the World" (Penguin Press), was published in March—are about action: memory as action, vision and writing as action. She asks us to consider the sometimes unrecognized, though always felt, ways in which power inserts itself into our lives and to think about how we can move forward with what we know. History—with its construction and its destruction—is at the heart of "In the Lateness of the World." In "Museum of Stones," the first poem in the book, Forché's delicate but hawklike observations show us the broken dreams and false idols that are left in the wake of violence, folly, and time. She also shows how to pick our way through that detritus to search for clues as to who we were or might have been:

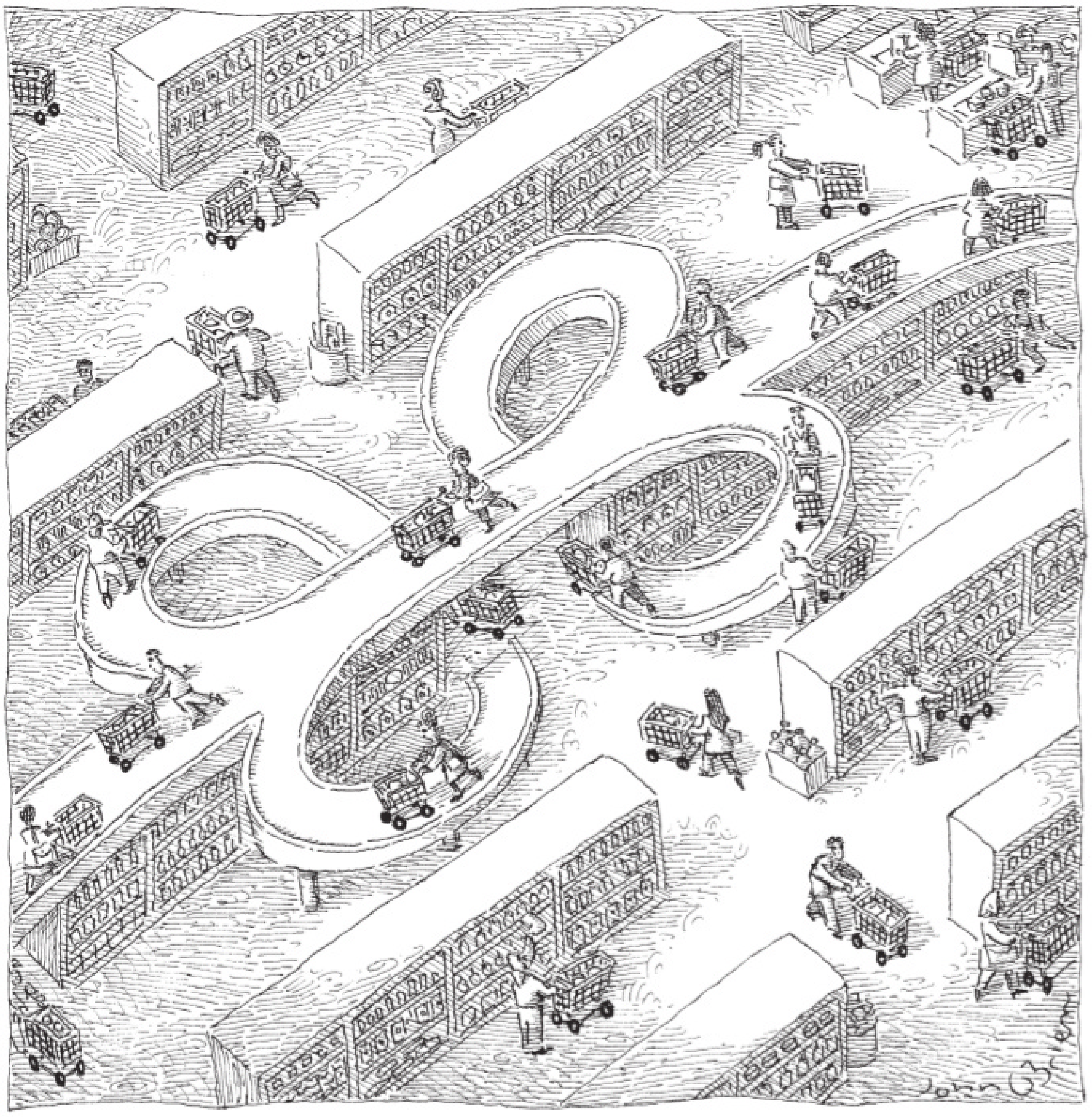
> These are your stones, assembled in matchbox and tin,
> collected from roadside, culvert, and viaduct,
> battlefield, threshing floor, basilica, abattoir—
> stones, loosened by tanks in the streets,
> from a city whose earliest map was drawn in ink on linen,
> schoolyard stones in the hand of a corpse,
> pebble from Baudelaire's *oui*,
> stone of the mind within us
> carried from one silence to another . . .
> stone from the tunnel lined with bones,
> lava of a city's entombment, stones
> chipped from lighthouse, cell wall, scriptorium,
> paving stones from the hands of those who rose against the army,
> stones where the bells had fallen, where the bridges were blown . . .
> all earth a quarry, all life a labor, stone-faced, stone-drunk
> with hope that this assemblage of rubble, taken together, would become
> a shrine or holy place, an ossuary, immovable and sacred
> like the stone that marked the path of the sun as it entered the human dawn.

Faith has been part of Forché's story from the beginning. Born in 1950, she is the oldest of seven children. Her working-class religious Catholic parents, Louise and Michael, a tool-and-die maker, raised their brood in Farmington, Michigan, a suburb of Detroit. When Forché was about nine, her mother, whom she has described as a feminist, suggested that her bright, bookish daughter entertain herself by composing a poem. To show her how, Louise dusted off an old textbook—she had attended college for two years before marrying—and explained to Carolyn what meter was and taught her the importance of stresses. Forché was instantly taken by the poetic form. "I began to work in iambic pentameter because I didn't know there was anything else," she told Cott. "Writing was simply the reverie that I recorded."

While the surreal horror of the Vietnam War was still a daily reality, Forché completed a bachelor's degree in international relations at Michigan State University in 1972, and a master's of fine arts at Bowling Green State University three years later. In an essay for her essential 2014 anthology, "Poetry of Witness: The Tradition in English, 1500-2001," co-edited with the scholar Duncan Wu, Forché relates how, in her early twenties, she read excerpts from the transcript of the 1964 trial, in Leningrad, of the Russian-born poet Joseph Brodsky—Soviet officials weren't thrilled by his assertion, among other things, that it was God who gave him the authority to be a poet—and sent him some poems. Brodsky, who was then teaching in Ann Arbor, Michigan, near where Forché grew up, wrote back to the burgeoning writer, suggesting, first, that she include more of her own philosophy in her writing, and, second, that she read Anna Akhmatova. This was another turning point for Forché. She was moved not only by Akhmatova's spare, dissident "Requiem" but by how, under Stalinist rule, Akhmatova had largely composed the poem in her mind and, with help from some friends, memorized it to avoid committing anything to paper—an act that, according to Akhmatova's biographer Amanda Haight, was possible only "if one was convinced of the absolute importance and necessity of poetry." All of this—Brodsky's sense that his vocation was a gift from God, the fleeting smile of a woman who'd asked Akhmatova if she could describe the horror of the Yezhov terror (Akhmatova's answer: "I can")—began to change Forché. In her essay for "Poetry of Witness," she writes:

> As I was still in my early twenties and educated in the United States, I hadn't thought of poetry in these terms. I had not yet encountered evil in anything resembling this form, and had not yet, therefore, imagined the impress of extremity upon the poetic imagination, nor conceived of our relation to others as one of infinite obligation: to stand with them in the hour of need, even abject and destitute, in supplication and without need of response. If it were so—if description were possible, of the world and its sufferings, then the response would be that smile, or rather something resembling it.

Those concerns—the desire to stand with others, and to describe who we are and what we suffer—come to the forefront in Forché's accomplished first book of poems, "Gathering the Tribes," which won the Yale Series of Younger Poets prize in 1975. The book's emotional focus, as Stanley Kunitz, who judged the contest, observed in his foreword, is on kinship: "*Love of people, love of place.*" "Gathering the Tribes" is a book about traces—the ghostly matrilineal lines leading to and away from the poet—and her still developing womanhood; it is also about voices, and the dominant voice in the book is that of Forché's Slovakian grandmother, Anna. Part of the exquisite tension of the collection comes from Forché's effort to inhabit her grandmother as a young woman in Eastern



• •

Europe, moving from one unsettled world to the next. From "What It Cost":

> In the pink tintype earliest hours,
> we were moved out of Kiev.
> Grey pelts to our necks smelling
> as cold as in Wakhan on the dunged straw.
> Asleep with fog in our mouths.
>
> We ate the chunks bobbing in soup,
> someone thinking it excrement, and drank
> bad vodka poured over black breads. . . .
>
> We were young,
> the children ate flesh
> pulled from pyres.
> Mothers wrapped dead babies
> in blankets and carried them.
>
> As we will never know what it means,
> we will know what it cost.

While the voice in these often compact poems is solid, definite, Forché's perspective can shift from line to line: these poems are about consciousness as an active experience. The most exciting investigations in "Gathering the Tribes" involve identity: Who was Anna? What was it like to be her? Or to be Carolyn? In "The Morning Baking," Forché asks her grandmother to come back from death to answer those questions:

> Grandma, come back, I forgot
> How much lard for these rolls
>
> Think you can put yourself in the ground
> Like plain potatoes and grow in Ohio?
> I am damn sick of getting fat like you
>
> Think you can lie through your Slovak?

But the dead take their recipes—and their secrets—with them. That's one thing we hold against them. Along with our grief. One hears a bit of Sylvia Plath's brilliant and brittle accusatory tone here, though Plath would never have felt, let alone expressed, the anticipatory joy that Forché feels about the possibility of *becoming* her grandmother: "But I'm glad I'll look when I'm old / Like a gypsy dusha hauling milk."

Toward the end of the book, we find the poem "Mientras Dure Vida, Sobra el Tiempo"—"Memory becomes very deep, weighs more, moves less." If that's true (and it seems to be for Forché), is it possible that words, by contrast, weigh less, move more? That when people are gone we are free to make them up, out of longing, grief, or imagination? Forché writes:

> Last night a woman not alive
> came to my bedside, a black skirt, black
> reboso. She touched
> my blankets, sang like wind
> in a crack, saw
> that my eyes were open.
> She went to the kitchen
> without footsteps,
> rattled pans, sang *ma-he-yo*
>
> *Ma-he-yo* until morning.

In a recent interview with Chard deNiord, Forché recalls that after "Gathering the Tribes" came out she was teaching at San Diego State University. Her spirits were low. But then her life took a turn. Through a colleague, she met and became friends with Maya Flakoll, who was the daughter of the Nicaraguan-Salvadoran poet Claribel Alegría. In the nineteen-fifties and sixties, Alegría had belonged to a group of writers called *la generación comprometida* ("the committed generation")—artists who agitated for political change. By the time Forché met her, in the summer of 1977, Alegría was living in exile in Mallorca, writing extraordinary poems, which Flakoll encouraged Forché, who had been studying French and Spanish, to translate. "Flowers from the Volcano" is one of the poems Forché subsequently translated:

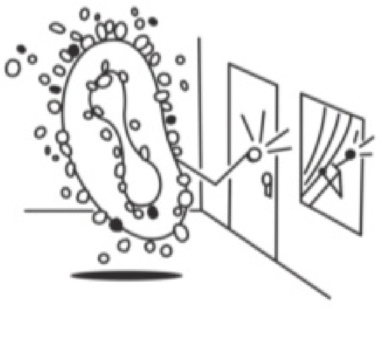
> Fourteen volcanos rise
> in my remembered country
> in my mythical country.
> Fourteen volcanos of foliage and stone
> where strange clouds hold back
> the screech of a homeless bird.
> Who said that my country was green?
> It is more red, more gray, more violent:
> Izalco roars, taking more lives.
> Eternal Chacmol collects blood,
> the gray orphans
> the volcano spitting bright lava
> and the dead *guerrillero*
> and the thousand betrayed faces,
> the children who are watching
> so they can tell of it.
> Not one kingdom was left us.
> One by one they fell
> through all the Americas.

Despite her sensitivity to the work, Forché didn't think that she could accomplish the task, in large part because she didn't know enough about the world that Alegría's poems grew out of. She knew nothing about Central America or about the forces that were pushing El Salvador toward civil war. Sitting with Alegría and her friends on the older poet's terrace in Mallorca, Forché began to understand how personal the political could be. In her memoir, Forché writes:

> From childhood, I had experienced bouts of depression, and my mother had also suffered this during her child-raising years. I would find her in her room sometimes, crying and staring at nothing. She told me that I would understand when I was older . . . In my own life, this darkness descended always unexpectedly. . . .
>
> Something could, at times, push against it. Work did, and also the urge to do something in the face of some wrongdoing or injustice inflicted against another, and this urge swelled during the conversations on the terrace in Mallorca that summer, as I sat on the edge of the circle taking things in, until, toward the end, I also worked at being invisible, because it seemed, from what I understood from these conversations, that injustices of a political nature were not historical accidents, and that most injustices in Latin America were supported or made possible by the United States, or that was my impression. One of the visiting writers had even responded to my plaintive question regarding ways I might get involved with something like: *There is nothing you can do, my dear. Change your government. Enjoy your summer.*

Of course, this condescending remark conveyed not only anti-"ugly American" sentiment but the marginalization that many women experience when it comes to activism: they are supposed to cook the meals and bear the children while the men do the "real" work. The examples of Akhmatova and Alegría had taught Forché to be alert to the chauvinism in that non-idea. Still, after returning to San Diego, Forché was at a loss as to how to become more actively involved in a situation she was just beginning to learn about. What did it mean for Alegría and others to live in exile? What did it mean not to have a home or be at home? One day, Forché was visited by Alegría's nephew Leonel Gómez Vides, who invited her to join him in El Salvador—to bear witness, as an artist, to what was happening there. As Forché recounts in "What You Have Heard Is True," the meeting with Vides and her decision to journey, alone, to El Salvador had a hallucinatory quality: at the invitation of a man she didn't know, she was going to live, at least for a time, in a country she didn't know. Indeed, what she didn't know about El Salvador and its relationship to "the Americas" could have filled a book. And it did, along with all that Forché discovered there, as she worked in conjunction with Archbishop Óscar Romero, in his efforts to stop social injustice, torture, and other forms of brutality.

Forché's 1981 collection, "The Country Between Us," bears witness not only to what she saw in El Salvador but to the broader U.S.-backed oppression in Latin America. The book is a masterpiece of poetry and of resistance. Nevertheless, it was rejected by several publishers. What had happened to the young woman who could embody her grandmother and write about family? Why hadn't she stayed in that territory of dreams and domesticity? In "The Country Between Us," Forché was a different poet—one remade by knowledge and by a need to tell the truth about where she was from. And the place Forché was from now wasn't just Michigan, or California, or the past, but corrupt El Salvador, a country where scenes such as the one she laid out with poetic care and reportorial clarity in her 1978 prose poem "The Colonel" could take place:



> What you have heard is true. I was in his house. His wife carried a tray of coffee and sugar. His daughter filed her nails, his son went out for the night. There were daily papers, pet dogs, a pistol on the cushion beside him. The moon swung bare on its black cord over the house. On the television was a cop show. It was in English. Broken bottles were embedded in the walls around the house to scoop the kneecaps from a man's legs or cut his hands to lace. On the windows there were gratings like those in liquor stores. We had dinner, rack of lamb, good wine, a gold bell was on the table for calling the maid. The maid brought green mangoes, salt, a type of bread. I was asked how I enjoyed the country. There was a brief commercial in Spanish. His wife took everything away. There was some talk then of how difficult it had become to govern. The parrot said hello on the terrace. The colonel told it to shut up, and pushed himself from the table. My friend said to me with his eyes: say nothing. The colonel returned with a sack used to bring groceries home. He spilled many human ears on the table. They were like dried peach halves. There is no other way to say this. He took one of them in his hands, shook it in our faces, dropped it into a water glass. It came alive there. I am tired of fooling around he said. As for the rights of anyone, tell your people they can go fuck themselves. He swept the ears to the floor with his arm and held the last of his wine in the air. Something for your poetry, no? he said. Some of the ears on the floor caught this scrap of his voice. Some of the ears on the floor were pressed to the ground.

When "The Country Between Us" was rejected by the first publisher it was sent to, Margaret Atwood, another older writer Forché admired, insisted that she not give up on the book. Eventually, it was published by Harper & Row, and it wasn't long before prominent journalists, following the escalating troubles in El Salvador, were mentioning Forché in their columns as a source on the situation. As she told deNiord, she found this confusing:

> I was surprised that my work was being read as political poetry. I wondered what was meant by that. I knew that "political" was a pejorative term, but I didn't know what they meant, because in El Salvador if you're political, you go to meetings every night, you're in a political party, you follow orders, you are in a disciplined, structured, political group. In the United States, as far as I could tell, it meant something loosely oppositional to the status quo. "Political" was a label, affixed to people who variously brought to light anything that seemed to contend with dominant thinking.

Part of what keeps "The Country Between Us" powerful to this day is that we learn what "political" means to us as Forché discovers it for herself. Yet, despite the support of many other writers, including Joyce Carol Oates, who praised "The Country Between Us" in the *Times*—"One feels that the poet has earned her bleak and wintry vision"—the collection wasn't greeted with open arms. Forché was accused of doing something—reporting—that was not part of her role as a poet. (The essayist Eliot Weinberger called it "revolutionary tourism.") But what is the role of the poet? Are writers responsible to some degree for the world they inhabit? These were questions that Forché was undoubtedly, if indirectly, putting to other writers, as, along with other brilliant poets, including Adrienne Rich, June Jordan, and

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THE NEW YORKER

Audre Lorde, she was carving out a place for poetry that not only spoke of the self but connected to the world.

In the years after "The Country Between Us" came out, Forché connected to the world in a variety of ways, some deeply personal. In 1980, she met the photographer Harry Mattison, whom she married in the winter of 1984. Mattison worked for *Time*, in South Africa, where, eventually, the couple came under government scrutiny for violating the Group Areas Act; that is, for sharing a home with a person of color. (Their landlord reported them.) As the situation escalated, Forché became pregnant, and she and Mattison left South Africa so that she could deliver the baby in relative safety. Her son and only child, Sean Christophe Mattison, was born a few weeks after the couple arrived in Paris, where they stayed for almost a year. Being a mother and making a family are, of course, essential themes in Forché's third collection, "The Angel of History" (1994), in which she writes about the resonance of disasters, such as Hiroshima and the Holocaust, but also about the ways in which the members of one generation can be affected by the gravity of what the preceding generation left behind to nourish them—or not. The extraordinary title poem begins:

> There are times when the child seems
> delicate, as if he had not yet crossed into
> the world.
> When French was the secret music of the
> street, the café, the train, my own
> receded and became intimacy and
> sleep.
> In the world it was the language of
> propaganda, the agreed-upon lie, and it
> bound me to
> itself, demanding of my life an
> explanation.
> When my son was born I became mortal.

Forché's role as a mother—the moral barometer against which all children measure themselves—is important, though not overwhelming, in the collection "Blue Hour," from 2003. With this book, the poet encountered the same criticism as with "The Country Between Us": What was personal? What was political? And how could the reader reconcile the two? A Briefly Noted review in this magazine said:

> The uncertainty of an individual's survival at any given point in history informs the first part of this volume, which mounts a quiet protest against the atrocities of the last century and insists that "even the most broken life can be restored to its moments." In such lines, Forché's persona—unflinching witness and eloquent mourner—prevails, but in the centerpiece of the collection, "On Earth," her obsessive documentation of inhumanity overwhelms her best lyric instincts. . . . [A]nd . . . the poem's collage of horrifying imagery feels gratuitous more often than it does inspired.

Forché's strongest critics seem to agree on this: that she, with her various intensities, can be "too much." But isn't the world too much? Toni Morrison once observed that there is no such thing as bigger than life: life *is* big. Forché, in her profoundly ambitious work, aims to capture that bigness, line by line. In "In the Lateness of the World," one feels the poet cresting a wave—a new wave that will crash onto new lands and unexplored territories. To read the book straight through is to see connections between her earlier work and her new poems because, by looking at the world, she has made a world, one in which her past is as present as her future.

In "The Boatman," a poem about refugees in Italy, one hears echoes of "The Colonel"—"We were thirty-one souls, he said, in the gray-sick of sea / in a cold rubber boat, rising and falling in our filth." But in the book's final poem, "What Comes," Forché takes apart the thought and thus the language that sent her to the page in the first place, a dialectical world littered with yeses and nos and her mother and Anna Akhmatova and Claribel Alegría and all the women and the mess and the beauty of identity in between, which are given shape by the care and discipline of poetry and the desire to speak. And yet, as much as life takes, it gives, including the poet's voice and its myriad possibilities, among them how to render silence:

> to speak is not yet to have spoken.
> the not-yet of a white realm of nothing
> left
> neither for itself nor another
> a no-longer already there, along with the
> arrival of what has been
> light and the reverse of light . . .
> you have yourself within you
> yourself, you have her, and there is
> nothing
> that cannot be seen
> open then to the coming of what comes ♦

Screen Time

Performers on lockdown turn to their smartphones.

BY ALEXANDRA SCHWARTZ

Nine days, which feel like nine weeks, have gone by, as of this writing, since Broadway went dark and New York's theatres closed their doors. By the time you read this, it may well feel like nine years. The suddenness with which the city's performance ecosystem has vanished defies comprehension—it's as if the Great Barrier Reef had died overnight. Grasping for comparison, we have to look well beyond the proximate disasters of Hurricane Sandy and 9/11, when, ultimately, the shows went resolutely on. There's been some optimistic speculation online as to whether Shakespeare wrote "King Lear" in quarantine when the plague forced the Globe to close, in the summer of 1606. (A comforting thought, if you happen to be both a genius and good at focussing in times of existential crisis.) During the Second World War, London initially shut its theatres and cinemas—"a masterstroke of unimaginative stupidity," George Bernard Shaw called the decision—only to reopen many of them when it became clear that morale needed boosting. But keeping calm and carrying on is not in the pandemic playbook. We are our own threat. The enemy is within.

What's immediately apparent, in a suddenly theatreless world, is how difficult theatre is to replace. The mechanism—bodies doing things in front of other bodies—is too basic. (Or bodies cavorting with other bodies, as the case may be; among this season's now suspended offerings was Taylor Mac's new play, "The Fre," in which the audience was seated in a ball pit.) You can tape theatre and stream it, for which I am hugely grateful, not least because it gives more people access to shows. But what you watch through this method is inevitably only a facsimile of the real thing. It's like eating a food that you can smell but not taste.

I hope it doesn't sound too prematurely elegiac to say that one of the things I miss about going to the theatre is the going: leaving home, travelling, with a sense of purpose, to a specific place at an appointed hour. I miss threading my way through the obstacle course of Times Square, secretly proud of my agility. And I miss being part of an audience, one soul among many. I even miss the reliable, infuriating madness of other people. Dear Elderly Sir, who inexplicably texted throughout "Greater Clements": I may not think highly of you personally, but I hope you're doing all right. Dear Madam, whose chromatic, flutelike snoring during the first act of "The Ferryman" led to an intra-aisle shushing war the likes of which I have never heard before or since: my best wishes to you. To the tweens who packed together in a line around the block, just before the advent of social distancing, for a preview of "Six": your energy was infectious, I hope only in the figurative sense. Please stay home.

Theatre artists and technicians are out of work right now, which spells terrible anxiety and financial distress. It also means that creative people are trying to find creative things to do. If there is one silver lining to this crisis, it's that it hit in the age of the smartphone, when performance is everywhere. So we find our perspective shifted. The ratio is now one to one: me watching you, my screen to yours. Glamour? Mystique? Polish? Shine? No, no, no, and no. But who needs them? This is a time for the curtain to be pulled back.

Instagram Live, previously a place for celebrities to offer the public slick

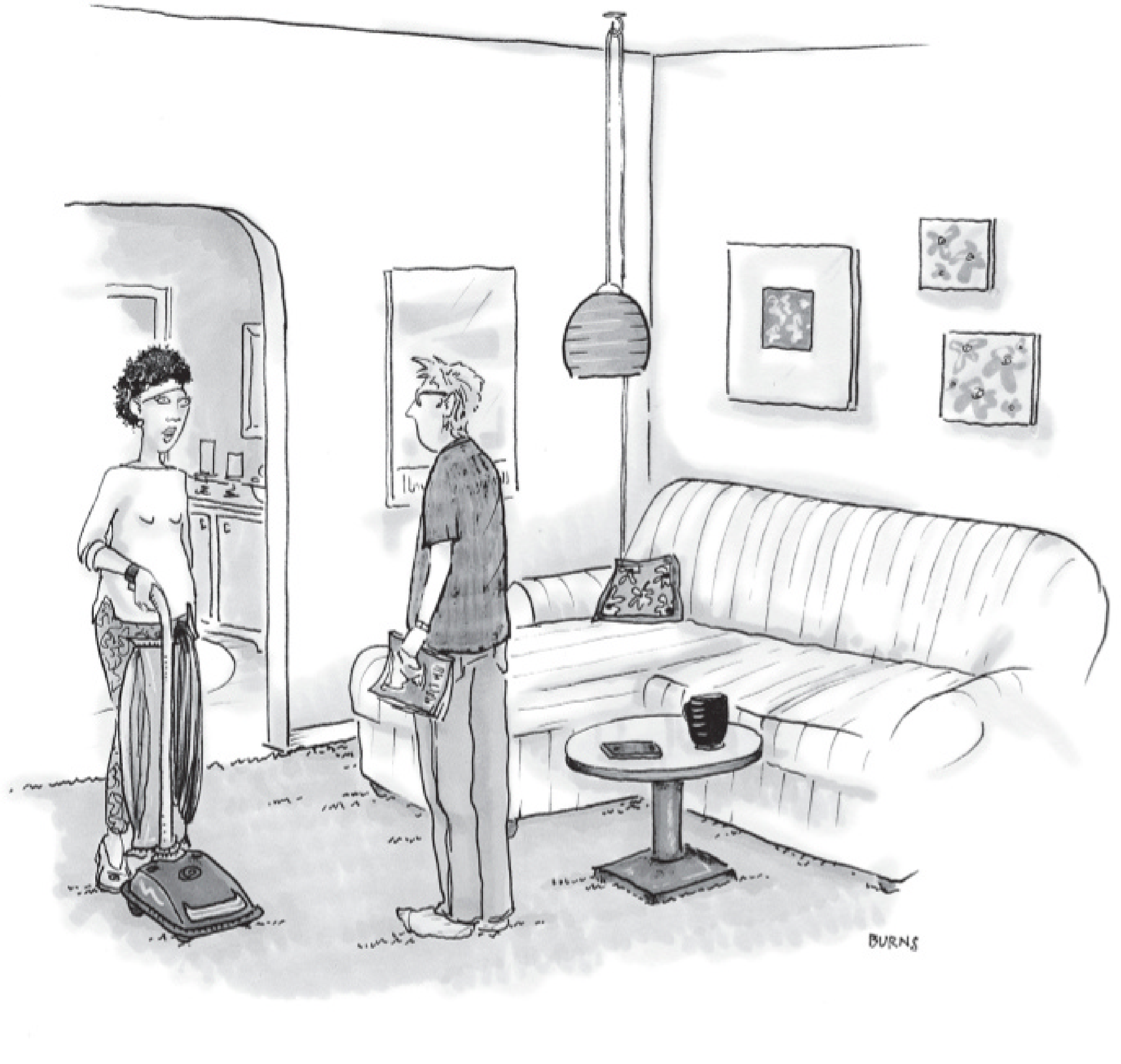
Instagram Live has been repurposed as a cabaret, abuzz with performing artists.

ILLUSTRATION BY GOLDEN COSMOS

glimpses into their worlds, has been repurposed as a cabaret, abuzz with performing artists doing what they can for us from their living rooms. Patti Smith and her daughter Jesse Paris Smith squeezed together to serenade their followers through the screen. The sublime jazz singer Cécile McLorin Salvant, with Sullivan Fortner on the piano, gave an impromptu concert; it looked as though the pair were performing for their own pleasure, which, in turn, bolstered ours. Rosie O'Donnell raised money for the Actors Fund by chatting, via video stream, with other performers, including Cynthia Erivo, Patti LuPone, Idina Menzel, and Chita Rivera. LuPone showed off her jukebox. Andrew Lloyd Webber sang "Happy Birthday" to Stephen Sondheim; Stephen Sondheim sang "Happy Birthday" to Andrew Lloyd Webber while vigorously washing his hands. Alan Menken, at a piano stationed in front of a grandfather clock, performed a career-skimming medley that ended, on the nose, with "A Whole New World," from "Aladdin." The lighting was reassuringly awful. Watching these bits was like getting stuck on a FaceTime call between the famous: cute at first, then a little boring, but endearingly nerdy, with Channel Thirteen fund-raiser-style energy.

It must be hard to make original work under these conditions of general menace, but some performers are persevering. The best I've seen in the past week was produced by the 24 Hour Plays, an organization whose regular stunt involves putting together plays and musicals that are written, rehearsed, and performed in the space of a single day. On Instagram, the group has been hosting a series of "viral monologues": new, very short pieces that were commissioned from homebound playwrights and performed by homebound actors. The first installment, still available for viewing, was posted on March 17th. No surprise that the subject most on the minds of the playwrights was disaster. In a monologue by Lily Padilla, Marin Ireland, playing a dissolute young teacher, delivers, directly into a phone camera, what we soon realize is an application to be abducted by extraterrestrials. She's ready to be beamed up and away from this cursed planet, but the question is whether the aliens will have her. "What *I* would contribute to your galaxy?" she asks, chewing her lip. "Well . . . I am enthusiastic. And I . . . think that's an important quality on any team." In just four minutes, Ireland, with her big, distant, unreadable eyes and expressive mouth, sketches a portrait of a woman who wants nothing more than to trade in her known life and surrender to the intoxicating unknown. "Honestly, I'm afraid the world is burning," she says. "And it's not that I'm afraid of dying or even catching fire. I just don't want to watch."

Part of the pleasure of the 24 Hour viral monologues lies in seeing what actors do when left to their own devices, far from the smoothing, sculpting hand of a director. The selfie-video format has the feel of an audition tape, an allusion that the great Richard Kind makes explicit in a quick, clever monologue by Jesse Eisenberg, in which Kind asks Hollywood to cast him against type, for once, as a Gentile. In a piece by Stephen Adly Guirgis called "L.A. Yoga Motherfuckers," Andre Royo sits in a car and launches into a disgruntled, hilariously unhinged rant about civility and "these Bernie bros and their Bernie hos," who appear to have chased him out of a yoga class after he expressed support for Joe Biden. A coronavirus joke falls flat, but it's good to see playwrights bringing new characters into the world to respond, in the moment, to the same things that we're responding to. Free from motive, free of the harness of plot, they flicker briefly alive to share these strange times with us and then disappear, but not without leaving a mysterious, human trace.



"I'm going to be vacuuming, if you want to go into the farthest room and start asking me questions."

In good times, we want performance to shake us and stir us, to horrify or delight, to rouse, to make us feel strong things. Daily living can dull the senses (including the moral one), and we ask the theatre to help us sharpen them again. But in a time of fear and strained feeling, when we are thinking non-stop about our welfare and its connection to other people, it's comfort that we want. That's why, while watching the 24 Hour viral monologues, I thought of one of my preferred forms of digital direct address, the soft-spoken parallel universe of the Internet genre called ASMR.

If you're a digital native, you know what I'm talking about, so bear with me while I offer a brief introduction. ASMR is the name given to a physical sensation, without known neurological cause, of gentle and pervasive pleasure. The name, which is short for "autonomous sensory meridian response," suggests some scientific authority that is as yet unfounded. No one knows what this thing is, or which neurons fire in the heads of the people who flock in droves to old Bob Ross videos on YouTube to bask in the unflappable lilt of his folksy patter and the calm, sure sound of his palette knife as it flicks and scrapes pigment onto the canvas.

One way to describe ASMR is as a kind of sustained tingling that begins in the scalp and spreads to the back and the limbs, a bit like the tickling that leads up to a sneeze. It's as if a tiny hand has reached through the ear canal to deftly, tenderly, brush the surface of the brain with a feather. The shoulders relax; the jaw loosens. The feeling is induced by certain stimuli, or, in the language of the large Internet subculture of people who make videos to elicit an ASMR response in others, "triggers." The sound of whispering and that of a low, calm voice are popular triggers, as are "mouth noises": the light smack of lips parting, the clack of a hard consonant born at the back of the throat, the slur of the tongue sliding along the palate. Hundreds of ASMR videos on YouTube show women tapping and scratching long, manicured nails against countertops and makeup cases and the covers of hardback books. There are paper-crinkling videos, and videos in which women (it is usually, but not always, women; the genre has a bias toward a maternal, nurturing tone) pop bubble wrap, or plunge their fingers into bowls filled with buttons or M&M's, or scatter and stroke the pieces of a jigsaw puzzle. I have listened to someone count in a slow whisper from one to a hundred in German, for no other reason than that it seemed soothing at the time.

Can this get a little creepy? Sure it can. I had thought that fixed notions of the eternal feminine were pretty much dead, and yet the band of young women who practice ASMR tend to take her as their guide. It can all get a bit haremesque. Click and click and click; one whisper chamber leads to another, and another, and another, the Internet turned, for a change, into a pleasure palace made by women for one another. The women of ASMR see themselves as caregivers, unofficial tenders to their fellow video watchers' mental health, and, as totally nuts as that seems, they're not altogether wrong.

What the best ASMRtists—as they are, of course, called—have figured out is that virtual reality does not have to rely on fancy technology. They are monologuists at heart, and, like all successful performers, they know how to employ the transitive property. You say that you are touching me; I feel, somehow, that I am being touched. Resourceful ASMR practitioners make canny use of simple tricks of perception, which have come to define the genre's narrative conventions. Digital role-plays, which dominate ASMR-land, require the implication of a dialogue between the ASMRtist and you, the person being attended to—at the salon, or the shoe store, or whatever medical office you might visit to get an ear cleaning or a procedure, popular with ASMRtists, that is called, rather sinisterly, "a cranial nerve exam." There are numerous videos in which an interlocutor "listens" and responds as you speak about the hard day you just had. Your participation is not actually required; just sit back, relax, and enjoy the sympathy.

A form that aims to soothe anxiety and calm the mind, to transmit physical sensation without touch, seems made for our frightening, contactless moment. The other day, I went to YouTube, and typed in "ASMR coronavirus." Sure enough, up popped video after video. Some of them were pretty weird, even by the conventions of the genre; a Brazilian ASMRtist bouncing a rubber ball made to look like a molecule of COVID-19 is perhaps not to everyone's taste. I am right now being "examined" by ASMR Darling, an ASMRtist with nearly two and a half million subscribers. She is wearing a lab coat and a face mask and is saying, in the softest tone possible, that she is about to take a nasal swab to test for the virus. It's scary and soothing at the same time. In the world that she's created, we can all get the care we need. ♦

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Midnight Trains

The outdoor opera "Sweet Land" summons ghosts of Los Angeles history.

BY ALEX ROSS

In 2015, the Los Angeles-based theatre company the Industry mounted "Hopscotch," an outdoor, mobile, multi-composer opera of staggering logistical complexity and transporting, almost delirious beauty. It unfolded like a magical-realist fable in which the experience of the observer becomes part of the story. Certain of its images—a trumpeter playing at the top of a water tower, with a trombonist on a distant rooftop answering him; a soprano, in a red dress, gliding along the cast-iron walkways of the Bradbury Building's famed atrium; another soprano singing while riding in a Jeep along the Los Angeles River—will stay with me as long as I remember anything. It was a waking dream of a city, and I keep wishing I could have it back.

In February and March, the Industry presented a new opera, "Sweet Land," its most ambitious venture since "Hopscotch." The vibe was stranger and darker, bordering on nightmarish. The title has a bitterly ironic ring: the work tells of lands plundered, peoples murdered, cultures appropriated. My reaction was undoubtedly conditioned by the encroaching coronavirus pandemic, which soon shut down American public life. Yet "Sweet Land" would have been a punch in the gut under any circumstances. Chaotic, conflicted, implacably honest, it unfurled a narrative that dismantled its own ideological underpinnings and exposed its own lies.

Yuval Sharon has a singular flair for staging work in open-air spaces.

"Hopscotch" and "Sweet Land" both emanated from the potent theatrical sensibility of the director Yuval Sharon, who founded the Industry, in 2010. He has a singular flair for staging work in open-air spaces, letting landscapes become part of the drama. The setting for "Sweet Land" was the Los Angeles State Historic Park—a patch of green in a concrete expanse, hemmed in by freeways, the L.A. River, and a light-rail line. During the performances, which began in the evening, trains would periodically clatter by, with perplexed commuters peering out the windows. The image of a train hurtling into the dark is an elemental trope of American myth; in "Sweet Land," myth merged with the grimy routine of the everyday. As in "Hopscotch," but in a much more unsettling way, the border between stage and city disappeared.

The program for "Sweet Land" included a "Land Acknowledgment." Julia Bogany, of the Gabrieleno Tongva San Gabriel Band of Mission Indians, wrote, "We, the Indigenous People, the Traditional Caretakers of this landscape, are the direct descendants of the First People who formed our lands, our worlds during creation time. We have always been here." One aim of "Sweet Land" is to give voice to the Tongva people, who once thrived in the Los Angeles Basin. At the same time, the opera reserves its right to fantasize on historical themes. A cryptic prologue, titled "Contact," portrays the first encounter between groups called the Arrivals and the Hosts—essentially, colonists and indigenous tribes.

Sharon and his co-director, the Native American artist Cannupa Hanska Luger, chose not to let any one perspective dominate the proceedings. Two creative teams produced the music and the text: the Chinese-American composer Du Yun worked with the writer Aja Couchois Duncan; Raven Chacon, a composer of Navajo background, was paired with the poet Douglas Kearney. There are two distinct narrative components, "Feast" and "Train," each ensconced in its own roundhouse venue. After the prologue, which takes place in bleachers overlooking the park, the

ILLUSTRATION BY WESLEY ALLSBROOK

audience is divided in half, with one group sent to "Feast" and the other to "Train"; only by attending "Sweet Land" twice could you see both. The structures were built for the occasion, under the direction of the theatre designer Jeanette Oi-Suk Yew.

"Feast" depicts what happens immediately after the Arrivals make their appearance. It is loosely based on the interaction between the Pilgrims of Plymouth Colony and local peoples—an initial period of peace and mutual assistance followed by aggression on the part of the settlers. A warm, welcoming atmosphere, signalled by dozens of lit candles, dissipates when an Arrival named Jimmy Gin declares, "God gave us dominion over everything," and threatens Makwa, a young woman of the tribe. Weapons are drawn, and the Arrivals seem to retreat. The second part of "Feast" is a kind of erasure of the first, presenting history as the victors tell it. Makwa is being married off to Jimmy Gin, alongside a Thanksgiving-style feast. She protests in vain as the ceremony proceeds. "Who wants seconds?" someone cries.

"Train" is a tale of industrialization and brutalization. The language of missionary conquest and Manifest Destiny—"The Word of God is the Hand of God"—intersects with scenes of animal slaughter, work-gang labor, and mob violence. Doors rumble back and forth on casters, conjuring a real, or metaphorical, speeding train. In the second part, that bloodshed is forgotten as the society gives in to consumerism and self-gratification. A percussion-heavy chamber orchestra is positioned at the center of the roundhouse, with the audience arrayed in a circle surrounding it and the performers racing around the space's outer rim.

Du Yun and Raven Chacon, the co-composers, prove to be a good match. Both draw on a wide spectrum of musical techniques, from the folk-primeval to the experimental. Chacon brings to bear his understanding of Native American musical traditions: in the latter half of "Feast," he creates a mesmerizing multicultural counterpoint, blending Makwa's sorrowful arias of remembrance with the sinuous cantilena of Host spirits and blocky four-part hymns sung by the Arrivals. Shimmers and flecks of instrumental sound establish a wide-open atmosphere, as if the city had wafted away into wilderness. The sonic textures of "Train" sometimes become dense to the point of incoherence, but Du Yun provides a thunderous climax in the form of bulldozing drones, pounding ostinato, and blasts of electric-guitar feedback.

Between the two parts of "Feast" and "Train," the audiences leave their venues to see an outdoor interlude called "The Crossroads." A trio of singers evoke ancient spirits: Carmina Escobar and Micaela Tobin jointly played the trickster Coyote, and Sharon Chohi Kim was the monster Wiindigo. The costumes, designed by Luger and E. B. Brooks, combine folkloric and surrealist features: brightly colored woollen garments, masses of fur, animal heads. The music, partly improvised, wavers between unearthly ululation and piercing lyricism. Throughout the scene, a sprinkler system is operating in an adjoining field, and images of horses, deer, and buffalo are projected onto the spray of water—ghosts of the land as it once was.

At the end, the full audience reassembles in the bleachers to witness "Echoes and Expulsions," a harrowing epilogue of protest and lament. Unseen singers tell of the dark side of L.A. history: stories of enslaved indigenous children, of the Chinese massacre of 1871, of a Latina woman undergoing involuntary sterilization. A youthful figure crawls around a construction site at the corner of the park—perhaps scavenging for food, perhaps digging for the truth. Trains trundle by; fire engines scream across the North Broadway Bridge, in the distance. A chill descends, and not just because it can get cold at night in L.A.

The coronavirus shutdown cut short "Sweet Land" in the middle of its run. Smaller, nonprofit groups like the Industry are already reeling because of the crisis; some may not come back. The Industry is trying to recoup lost revenue by offering a video of "Sweet Land" for sale online. Cameras cannot capture the eerie power of the event, but the zooming lens picks out details that I missed live: subtitles projected on billboards like spectral graffiti, the image of a deer flickering across the bridge. The video was made after the cancellation of the show, when the city was closing up. The last train that passes through is almost empty. ♦

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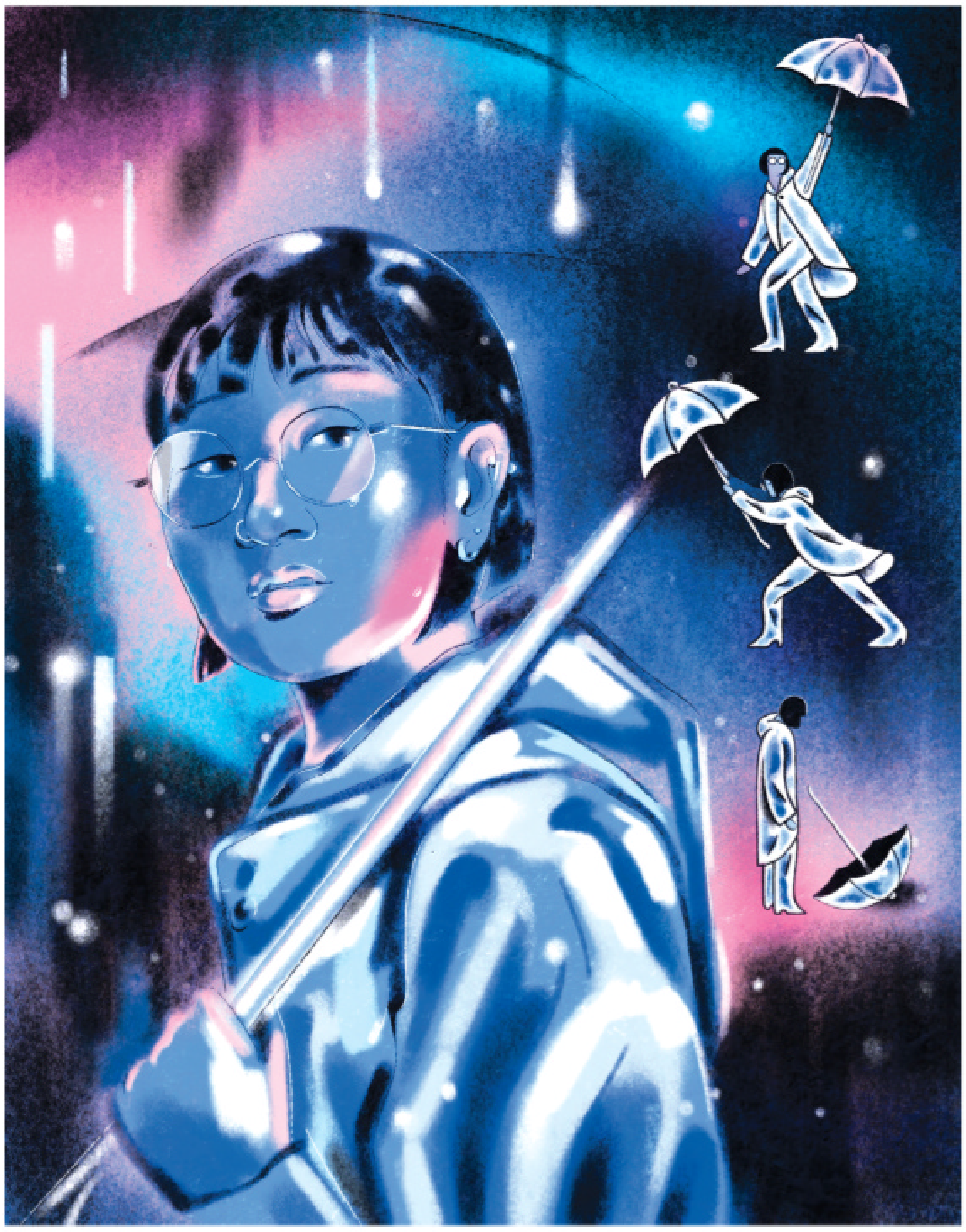

The d.j. and producer's songs evoke going out and sweating alongside strangers.

ILLUSTRATION BY REBEKKA DUNLAP

The Right Time

Yaeji's dance music throws us back to a communal way of life.

BY HUA HSU

When I first heard "New York 93," by the Korean-American d.j. and producer Yaeji, it felt like something I'd waited for my whole life, only I'd never known to want it. The track, released by Godmode Records in 2016, begins with the faint outlines of a house tune—an echo of an echo, as synth pulses, bass kicks, and occasional drip-drops all hint at a euphoric anthem that takes its sweet time to peak. Yaeji whispers softly over the track, humming a singsong of English and Korean, as though she's beckoning you closer to tell a secret. By the time that tambourines arrive, snapping everything into place, you're like confidants. And then it abruptly comes to a close.

Much of the way in which we hear the world derives from how we grew up. Listening to Yaeji, I realized that the rhythms and cadences of various Asian languages, spoken at home or in friends' houses, at restaurants or on Asian TV stations, were part of how I came to hear the world. These were voices that I occasionally tried to tune out. But they conveyed feelings and formalities, expressions of affection and angst, that didn't always translate perfectly into English—the seemingly mellow, nagging lilt of Mandarin, for example, might actually communicate desperate yearning. These different emotional registers have become more familiar to us all. As K-pop becomes a global force, it trains listeners from around the world in how to hear anew. You don't need to understand Korean to luxuriate in the music's extravagant approach to melodrama, the liberating effects of the ecstatic and the garish.

Yaeji, whose real name is Kathy Lee, was born in Queens in 1993. Her family moved to Long Island, and then to Atlanta, before settling in South Korea. In 2011, she returned to the United States to study at Carnegie Mellon, where she became immersed in dance music. She began making tracks and d.j.'ing for the college radio station, occasionally uploading songs to SoundCloud. She followed "New York 93" with two great EPs, which fleshed out her cute, almost miniaturized fusion of vocal house and Asian pop. She covered Drake's house-tinged R. & B. hit "Passionfruit," replacing the original's wounded machismo with a kind of tender resilience. As increasingly happens these days, she moved relatively quickly from posting music for free online to playing festivals such as Coachella. Her songs continued to toggle between moments of twee intimacy and the collectivizing throb of the dance floor. "Raingurl," a track from 2017, alternates between soupy house rhythms and ethereal synths, as Yaeji describes timidly walking into the club: "Mother Russia in my cup / And my glasses fogging up / Oh yeah, hey dawg, hey, what's up."

The mixtape "What We Drew 우리가 그려왔던," which comes out this week, is her first release on XL Recordings. "Thanks to the ones that walk alongside me / I can continue on," she sings in Korean on the title track. There's more of a soaring, strident quality to her voice than on her early songs, which often evoked a fuzzy, A.S.M.R.-like feeling. "The things I drew," she continues, "I've created that world / With the people I love."

It wasn't until Yaeji began getting acclaim in the Korean press that her parents, who live in Seoul, truly understood what she did. Her success has brought her around the world, and the effects are apparent on "What We Drew 우리가 그려왔던," which is full of new collaborations with artists from the United States and Asia. "Money Can't Buy," featuring the Brooklyn rapper Nappy Nina, is like a hip-hop track put together on an assembly line, all bleeps, drill sounds, and sprays of machine exhaust. "Sit in a circle and look at each other and reminisce how we got to meet each other / Laugh with each other and show one another what it's like to share love with each other," Yaeji chants in English.

There's a sketchbook quality to "What We Drew 우리가 그려왔던," straying from the straight-ahead house rhythms of her initial singles. The electro-thump of "In the Mirror 거울" moves toward moody, head-banging territory; "These Days 요즘" is like an excursion into dub-jazz, an unravelling steady beat serenaded by a distant, almost ghostly saxophone. Other tracks can feel frivolous, as if she were pressing Record simply to capture a fleeting moment. On "Free Interlude," the rappers Lil Fayo, Trenchcoat, and Sweet Pea trade somewhat nonsensical verses. ("A church has a steeple / I like all sorts of people / Every type of person / Dimples, I have several.") It sounds as though you've arrived too late to share in the joke.

I first heard Yaeji in 2016, during a time when going outside, let alone going out, was still a matter of personal choice. Her songs, slipstreams of language and feeling, suggested a future I wanted to see bloom.

I initially mistook the title "New York 93" for some nostalgic tip of the hat to a golden age of the city's hip-hop and club scenes; in fact, it is simply the place and year of her birth. Musical revolutions are experienced anew each time young people happen across something they haven't heard before. Last fall, Yaeji threw a party that she called "Elancia," an attempt to recall the days when she began raving in New York, in the early part of the past decade—many years after what people often presume to be the city's creative peak. It's easy to get hung up on whether a sound or a style is truly original—or whether the brash new generation just suffers from historical amnesia. Yet the original part, the feeling that propels young artists forward, is that of discovery.

It's been odd to listen to "What We Drew 우리가 그려왔던" in the past couple of weeks, as calls to isolate ourselves have grown increasingly urgent. Yaeji's music is about the opposite of "social distancing": going out, idly basking in the brilliance of your friends, sweating alongside strangers. In our lowest moments, the thing that makes life meaningful is the realization that those who came before us found meaning, and endured. For many, that idea becomes clearest in the presence of others. Yaeji's music has always been about communion and friendship, portals into other possible time lines around the globe. And that's precisely what makes it such a tease right now. "What We Drew 우리가 그려왔던" is a collection of drafts and sketches, glimpses into a career on the go. But, for the time being, none of us is going anywhere.

Listening to music hasn't brought me much comfort lately, because it reminds me that the past seems impossibly far away, and the future promises only uncertainty. Being present is no longer a choice, the stuff of meditation or wellness. It's a condition of life. Listening to Yaeji alone last week, the highs somehow felt higher, and the silly parts seemed even sillier. "Introverse from an introvert," G.L.A.M. raps on "Spell 주문," which feels like a scaled-down K-pop anthem; it gets funnier the more I listen to it. The lush synths that announce "My Imagination 상상" sound even dreamier. "What I wanna do / Eat rice and soup," Yaeji raps in Korean on "Money Can't Buy." "What I wanna have / Money can't buy."

When you engage with art or music, you are exploring someone else's imagination. It's never yours, even if you're the one who made it. It's a gift, a secret that's passed among those who care, changing the texture of existence, maybe in minuscule ways. There's nothing better than listening to music with strangers—dancing, sharing amazement, scanning faces to see if you're the only one in this moment. Afterward, life no longer sounds the same. For now, these songs by a young Korean-American woman telling us about the world she sees—a world brought into being with friends, goofing around in a studio or sweating together on a dance floor—are about some bygone way of life, or simply a reminder of what awaits, as long as you can wait. ♦

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CARTOON CAPTION CONTEST

Each week, we provide a cartoon in need of a caption. You, the reader, submit a caption, we choose three finalists, and you vote for your favorite. Caption submissions for this week's cartoon, by John Klossner, must be received by Sunday, April 5th. The finalists in the March 23rd contest appear below. We will announce the winner, and the finalists in this week's contest, in the April 20th issue. Anyone age thirteen or older can enter or vote. To do so, and to read the complete rules, visit contest.newyorker.com.

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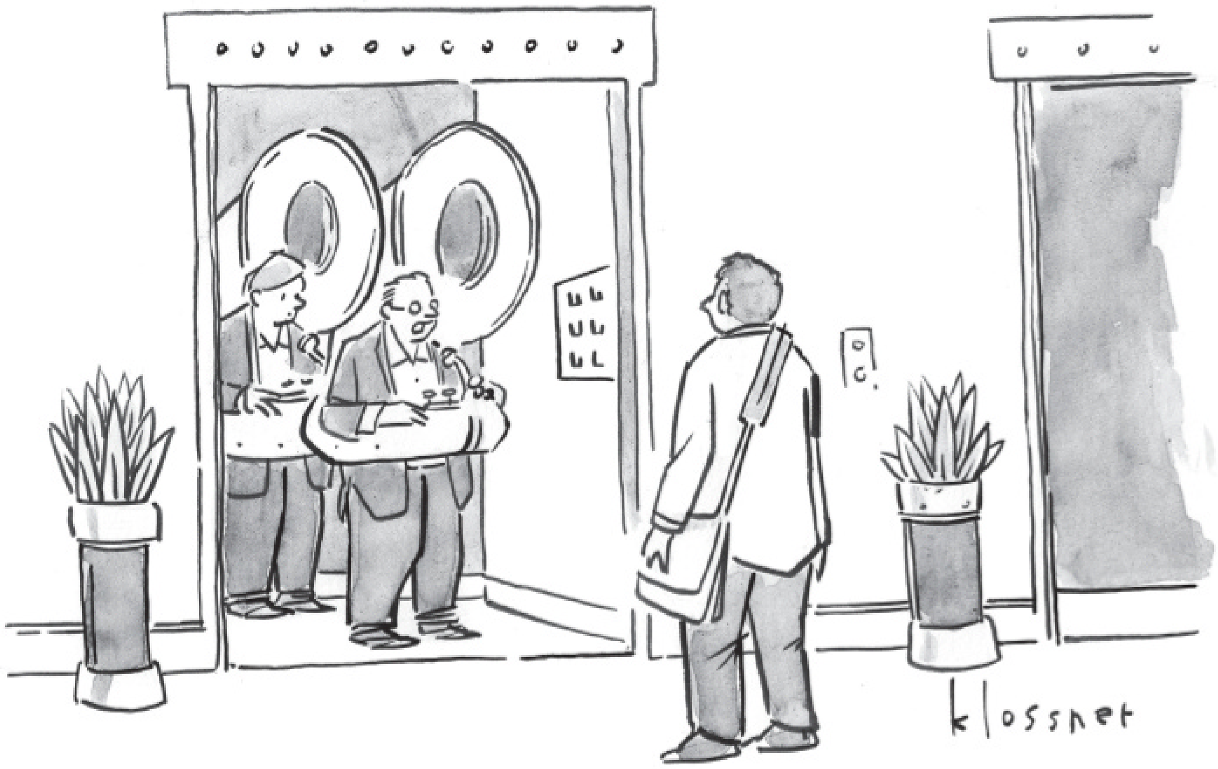

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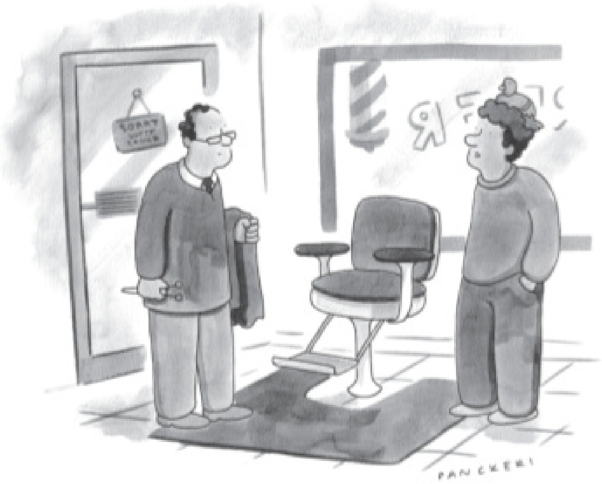
THE FINALISTS

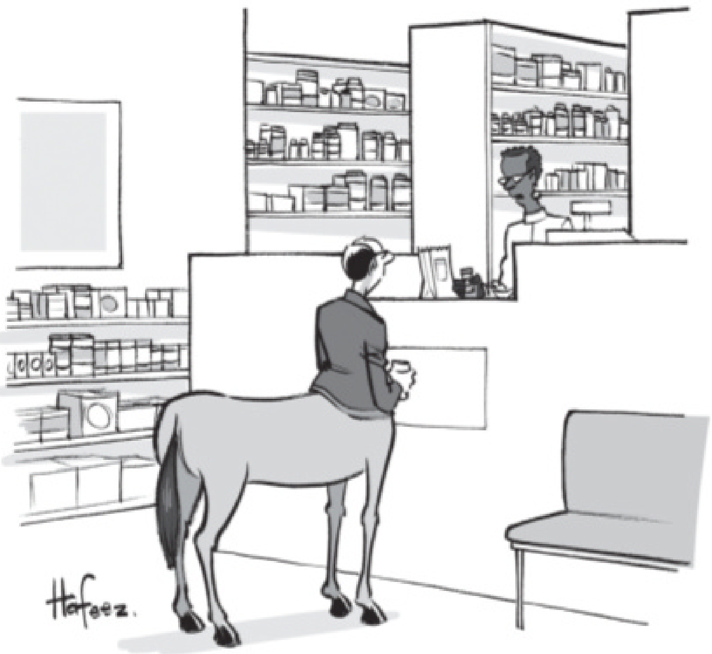


“When you wear a baseball cap, everyone knows you're just covering a bald spot.”
Lauren Rose Linett, Los Angeles, Calif.

“Just be glad I didn't come here when I had a ponytail.”
Tyler Stradling, Mesa, Ariz.

“Could you trim the sides but leave it feathered on top?”
Ben Long, New York City

THE WINNING CAPTION



“Looks like you're already familiar with the side effects.”
Madeline Wolfson, Brooklyn, N.Y.

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